



# Radio Tarana Diners Club Card Application



To apply for a Diners Club Card you must meet **ALL** the following 3 requirements:  
**18 years or older; and a New Zealand citizen/resident; and have an annual income over \$20,000.**

### Details of Main Applicant

Title: *(please tick)*  Mr  Mrs  Ms  Miss  Other: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ DD / MM / YYYY

Surname: \_\_\_\_\_ First name(s): \_\_\_\_\_

Confirmation of Identity: *Please provide at least one*

New Zealand Driver Licence: 5a: \_\_\_\_\_ 5b: \_\_\_\_\_ Car Registration Number: \_\_\_\_\_ Other form of photographic ID & reference no: \_\_\_\_\_

### Contact details

Residential address: Street \_\_\_\_\_ Suburb/RD \_\_\_\_\_  
Town/City \_\_\_\_\_ Postcode \_\_\_\_\_

Current residential status and length of residence:  Rent  Own  Board  Live with parents |  Less the 3 years  3 years or more

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

Email: \_\_\_\_\_ I wish to receive my monthly account statement via:  Mail or  Email

### Details of a relative or friend in New Zealand not living with you

Full name: \_\_\_\_\_

Contact no: \_\_\_\_\_ Relationship to main applicant: \_\_\_\_\_

### Income details

Employment status:  Employed – Full time  Employed – Part time  Unemployed  Retired  Other: \_\_\_\_\_

Employer/Company name: \_\_\_\_\_ Job title: \_\_\_\_\_

Gross annual income: *(please tick)*  \$20,000 - \$30,000  \$30,001 - \$40,000  \$40,001 - \$50,000  Over \$50,000

Details of other Credit Card(s):

Card Type:	Bank:	Credit limit:	Current balance:
Card Type:	Bank:	Credit limit:	Current balance:

### Free G.A.S. Diners Club Card

An optional card with no additional account fees, that lets you enjoy a 5% rebate on fuel and in-store purchases at 120 Gasoline Alley Stations nationwide.

Yes, I would like the free G.A.S. Diners Club Card (please tick): **Main applicant:**  **Supplementary applicant:**

### Supplementary Card – an optional additional card for your family member aged 18 and above.

Yes, I would like a Supplementary Card for the following family member. *(Please tick)*

Title: \_\_\_\_\_ First name(s): \_\_\_\_\_ Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ DD / MM / YYYY Relationship to Main Cardmember: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Mobile \_\_\_\_\_

### Club Rewards® - an optional loyalty programme from Diners Club.

Earn 1 point for every eligible dollar spent; points don't expire; Over 3,000 items to be redeemed, ranging from frequent flyer programme, shopping voucher and quality merchandise.

**Main applicant:**  Yes, I would like to join Club Rewards; the first year is free, then an annual membership fee of \$30 applies. *(Please tick)*

**Supplementary applicant:**  Yes, I would like to join Club Rewards; free for the life of the account. *(Please tick)*

### Annual account fee

Main Cardmember: **Free** for first year, then \$40 p.a. | Supplementary Cardmember: **Free** for first year, then \$20 p.a.

### Declaration

Please read and sign below (Note: Applicants must be aged 18 years or over.) I am applying for a Diners Club Card with PIN and confirm that: I am at least 18 years of age; the information provided in this application is true and correct; the acceptance of this application is subject to satisfaction of normal credit criteria and confirmation by Diners Club (NZ) Limited ("Diners Club"); upon such acceptance, I agree to be bound by the Terms and Conditions on which the Card is issued and is to be used and any amendments from time to time; I will be liable for all charges arising from the use of, or relating to, the Diners Club Card issued to me, supplementary applicant(s) and liability for supplementary cards. I agree that: all information (including personal information) obtained in respect of this application will be held by Diners Club and may be provided by Diners Club to any related company ("Diners Group"); Diners Group may use any such information to offer or advise the Applicant of any of their products and services (including offers or advice by electronic message to the applicant at their last known email address) or for credit reference or default purposes. Diners Group may obtain from or disclose to any third party any personal information relating to the Applicant; I am aware that I have the right to access and correct personal information held by Diners Group.

Please tick if you do not wish to receive exclusive offers from Diners Club or any related company.

### Main applicant's signature

\_\_\_\_\_  
Date: dd / mm / yyyy

### Supplementary applicant's signature

\_\_\_\_\_  
Date: dd / mm / yyyy

Please submit your completed form with the following documents to: Freepost 2015, Diners Club international, PO Box 1533, Shortland Street, Auckland 1140  
(a) A copy of photographic identification (e.g. New Zealand Driver Licence or Passport); and (b) A recent payslip, or a copy of your tax return if self-employed.

**For more information, please visit [www.dinersclub.co.nz](http://www.dinersclub.co.nz) or call toll-free 0800 346 377.**