申請表編號	٠	
TH 5H 77 MM 5/L	•	

澳門通「自動加值」服務申請表

致: 澳門通股份有限公司及澳門國際銀行股份有限公司

申請人/「自動加值」服務賬戶持有人資料 (請以正楷填寫)							
日 先生 日 女士	英/葡文姓名(請按身份證之姓名填寫)	中文姓	生名 (請按身份證之姓名填寫)			
出生日期:		月 年	身份證	身份證號碼:			
信用卡號碼:			流動電	話:			
澳門通「自動加值」服務 (請選以下其中一項):							
註:預設 1. 澳門茲 3. 澳門茲 3. 澳門茲 本次 本人 取消 本人 取消 本人 取消 本人 取消 本人 取消 本人 電話短訊提示 □ 每次成功	每次自動加值金额	: 的綁定的信用卡號碼·新信用卡號短短訊提示的流動電話·新電話號码 短訊提示的流動電話·新電話號码 卡自動加值服務 (澳門通卡號:_	限金額為澳門幣 2. 澳門通卡號 4. 澳門通卡號 5. 澳門通卡號 6. 惠:	•			
電話號碼條款及聲明	<u>(</u>						
予澳門通公司。表失效之變更,請表仍繼續有效 行")及/或澳門就本人所知所信務協議、及有關悉及同意於本申表內的每項服務	· 2. 如有關款項未本人必須於該等	表能自本人之信用卡賬戶內支付· 支款前不少於十個工作天以書面形 有用卡賬戶必須有效及保持良好信息 或終止申請人的自動加值服務而毋 及完全。本人如簽署本申請表·思明(包括由澳門通公司不時公佈之份 人之個人資料將連繫至本人持有之	製門通公司有權統 引式通知澳門通グ 用狀態・否則澳門 須事先通知。5. 即表示已細関、明 多訂)使用自動加 で、 で、 をご、 で、 で、 で、 で、 で、 で、 で、 で、 で、 で	長戶內支取款項繳付本人的澳門通自動加值費 追討本人的上述有關費用。3. 如有任何令此 公司。澳門通公司在尚未收到書面通知前,本 門國際銀行股份有限公司(下稱"澳門國際銀 本人聲明及確認,本申請表內提供的一切資 明白及同意遵守本申請條款、澳門通自動加值 值服務、澳門通卡及電話短訊提示服務。本 為自動加值服務賬戶持有人,本人同意為本申 人授權澳門國際銀行依照澳門通公司不時給予 製門國際銀行。	申請料服人請		
信用卡賬戶持日期:			,	不 從禮。			
申請人需在提交此申請表時連同身份證明文件副本一併遞交,所有已遞交文件概不發還。							
銀行專用 Apply Date		Input		Approved			

Form No.:	
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Macau Pass "Auto Top Up" Service Application Form

To: Macau Pass S.A & Luso International Banking LTD.

Applicant / Auto Top Up Account Holder Information						
☐ Mr. ☐ Ms.	Full name in E	nglish / Portuguese (Surnam	e first)	Full name in Chinese		
Date of Birth:	Day	Month	Year	ID Card No.:		
Luso Bank Credit	Card No.:			Mobile Number:		
Application of (Each Cardholder			Top Up for maxi	mum four Macau Pass Card.)		
Apply. I wish to apply the Auto Top Up for the following Macau Pass Card. Preset auto top up amount is MOP250 each time, Maximum auto top up amount is MOP500 per day. 1. Macau Pass Card:						
☐ Modify. Cr	edit card No					
I want to m	odify the credit	card No. of Auto Top Up. No	ew credit card N	lo. is		
I want to ch	nange the Mobil	e No. of Auto Top Up. New	Mobile No. is _			
☐ Cancel.						
I want to ca	incel the Auto T	op Up, my Macau Pass Card	no. is			
SMS Alert Se	rvice					
		ent to the above number of Au China Mobile No.)	to Top Up Accou	int Holder when the reload transaction was made.		
Terms & Decl	aration					
1. I hereby authorize MACAU PASS S.A. to effect debit to my above credit card account for settlement of my/our due including MACAU PASS S.A. Auto Top Up. 2. MACAU PASS S.A. will be entitled not to honor such payments should mu credit card account not contain the necessary credit limited and I/We shall hereby be liable to settle all above mentioned outstanding expenses immediately to MACAU PASS S.A. 3. Any variation or cancellation of this authorization has to be given by notice in writing at least ten working days prior to the date on which the debit is made to my credit card account. This authorization shall remain valid unless such notice is given to and received by MACAU PASS S.A. 4. I/We agree that authorization will be automatic invalid if the credit card account has been closed. 5. I/We hereby declare and confirm that all information in respect of me/us provided in this application form is true, accurate and complete to the best of my/our information, knowledge and belief. I/We also confirm that I/We have read and agree to be bound by the Terms of Application, the Auto Top Up Agreement and the Statement relevant to Personal Information Collection (as amended by MACAU PASS S.A. from time to time) in the use of Auto Top Up, the Macau Pass Card and Mobile SMS Alert Service. I/We acknowledge and agree that upon the approval of the Auto Top Up, my/our personal data provided in this application will be associated with my/our Macau Pass Card. As the Auto Top Up Account Holder, I also agree to be liable to MACAU PASS S.A. for all fees associated with the application by all Applicants under this Application Form in respect of each service as set out herein. I hereby agree that once this application is approved, I authorize Luso International Banking Limited to pay MACAU PASS S.A. in accordance with such instructions as it may receive from MACAU PASS S.A. from time to time. I promise to reimburse Luso International Banking Limited subject to and in accordance with the Luso Bank Credit Card Cardholder Agreement.						
CThe signature should be identical to the identity document) Signature of Principal Credit Cardholder Date: For Bank Use Only Apply Date Input Approved						