CASHBACK CARD Annual Membership Fee Waiver Redemption Form

DCS | card centre since 1973

GRF No. (Official use only):_____

Thank you for participating in our Club Rewards Programme. To redeem for your CASHBACK Card Annual Membership Fee Waiver, please **PRINT** out this Redemption Form, complete and mail it back to: **DCS Card Centre Pte. Ltd. 7500E Beach Road, The Plaza, #03-201, Singapore 199595**. For enquiries, please call our Customer Service at Tel: **6571 0128**.

I wish to select the following scheme:

CASHBACK CARD	
Basic Card	❏ **6,500 pts**
Supplementary Card	❏ **4,000 pts**
$500-Limit Card	❏ **3,000 pts**

Note
• Not applicable for Corporate and Affinity Cardmembers.
• Your redemption of Annual Fee Wavier will be effected after the billing period. Please ignore any fee(s) billed in the interim.
• This form is only applicable for the Diners Club Credit Card. Please use a separate form for the Diners Club Charge Card.
• Subject to Terms & Conditons of the Club Rewards Programme.

Please deduct my Club Rewards Points from the following Card(s):

Diners Club Card Account Number														Points to be Deducted

Name as appeared on your Diners Club Card: _____

NRIC / Passport No.: _____ _____ _____ _____   Mobile No.: _____   Home/Office No.:_____
(Last 3 digits + alphabet)

Mailing Address: _____

Name of **Basic**
Cardmember: _____   Signature & Date: _____

Name of **Supplementary**
Cardmember: _____   Signature & Date: _____

Please allow up to 10 working days for processing.
Changes and cancellations will not be entertained. Subject to Terms and Conditions of the Club Rewards Programme.

With the enactment of the Singapore Personal Data Protection Act 2012, we have made the necessary amendments to the terms and conditions relating to the provision of our services to you, including setting out the purposes for which we will collect, use and/or disclose your personal data, and these amended terms and conditions may be viewed at www.dcscc.com.

Please note that we will continue to use your data for the purposes for which the personal data was originally collected including for any marketing related activities.
For queries and clarifications, kindly email The PDPA Officer at pdpa@dcscc.com.

FOR OFFICIAL USE ONLY

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Date Received:_____   Batch No.:_____   Gender:_____   Processed By:_____   Type: ☐ CBC-Credit ☐ CBC-Ace

Processed Date:_____   Collection Date:_____   Remarks _____   Type: ☐ Per ☐ Co ☐ Ind

Current:_____   Outstanding:_____ / _____   CR A/C:_____

Authorised Signatory:_____   ☐ Approved ☐ Rejected _____