< For DCS Use Only >					



WITHDRAWAL OF CONSENT FOR MARKETING COMMUNICATIONS

For enquiries, please call: 6571 0128

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	IC / PASSPORT - LAST 3 DIGITS + CHARACTER
E-MAIL ADDRESS	
MAILING ADDRESS (Should <u>not</u> be a P.O. Box address)	
	E-MAIL ADDRESS MAILING ADDRESS (Should <u>not</u> be a P.O. Box address)

OPT OUT REQUEST PLEASE SELECT THE APPROPRIATE OPTIONS

l <u>do r</u>	not wish to receive any sales and marketing promotions via the following mode of communications:	
	OICE CALLS	
	SMS/MMS	
□ F	FAX	
	E-MAIL	
	MAIL (Mailing address as per record)	

AUTHORISATION & AGREEMENT

By signing below, I

- 1. understand that by this authorisation (to the extent indicated above), I will not be kept informed of the latest promotions, products and services marketed by DCS Card Centre Pte. Ltd. ("DCS"), which may suit my changing needs throughout my financial relationship with DCS.
- 2. acknowledge that DCS will endeavour to process my request within 30 working days upon receipt. If DCS is unable to meet this timeline, DCS will notify me of the revised timeline.
- 3. agree that this form will supersede any previous request.



Cardmember Signature ____

Date

With the enactment of the Singapore Personal Data Protection Act 2012, DCS have made the necessary amendments to the terms and conditions relating to the provision of our services to you.

These amended terms and conditions may be viewed at: www.dcscc.com

DCS Card Centre Pte. Ltd. Co. Reg No. 197300502W

^{*} I understand the information provided above by me will be updated in DCS system as my latest personal particulars and will be used to contact me.

THANKYOU for your request.

Please send us your form with this prepaid Business Reply Folder.

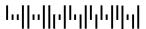
- I. Fold along the dotted lines;
- **2.** Put in your Form into this folder;
- 3. Glue or tape the edges of this folder;
- 4. Mail this folder at your nearest post box.

NO STAMPS REQUIRED



PRIVATE & CONFIDENTIAL

BUSINESS REPLY SERVICE PERMIT NO. 00429



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