

1. Status of Card Application

If you wish to find out the status of your card application, please submit this form and you will receive a reply within the following working day:

Card Type : Individual Corporate Travel Account

Your/Company Name:

Your Contact Number:

Email Address:

If you have any other queries, please contact our 24-hour Customer Service hotline: 800 244 0244

2. Additional Diners Club Card Application

You can apply for an additional card for one of your family members so they can enjoy the membership benefits even if you are not with them. The statement will separate your personal expenses from that of the family members which will have a separate total for each one of them. A fee of SR 100 per annum is applicable. A family member is one who is an immediate relative and must be at least 18 years of age. Brothers up to 23 years only.

Primary Cardmember's DC card no.
Name:

(1). Additional Card Applicant Information Please attach Saudi ID/Iqama & Passport copies

Name: Nationality:
Relationship to the Primary cardmember:
Name to appear on the card:

I, the above named, agree to be jointly and severally liable for all the transactions processed by the use of the card applied for and issued to by Diners Club and bound by all the Terms and Conditions of use of Diners Club which accompany the card.

.....
Signature of Additional Card Applicant Date

(2). Additional Card Applicant Information Please attach Saudi ID/Iqama & Passport copies

Name: Nationality:
Relationship to the Primary cardmember:
Name to appear on the card:

I, the above named, agree to be jointly and severally liable for all the transactions processed by the use of the card applied for and issued to by Diners Club and bound by all the Terms and Conditions of use of Diners Club which accompany the card.

.....
Signature of Additional Card Applicant Date

Declaration by Primary Card Applicant

I hereby authorize you and request you to issue, in accordance with the Terms and Conditions of Diners Club card, additional Diners Club card(s) to person(s) named above under my Diners Club Card Account identified above. I shall be fully responsible for all transactions conducted through the additional cards also.

.....
Signature of Primary Cardmember

3. Lost/Stolen Card Report

Important Notice

When a Diners Club card is found lost/stolen, it must be immediately reported to 24 hour Toll Free no. 800 244 0244 or to the nearest Diners Club office. (Visit www.dinersclub.com to find one).

This report is a follow up and must be filed in order to complete the investigations by your Diners Club office.

Please fill up this form and fax/email to +966-2-6520040

ı Lost ı Stolen

DC Card Number:

Al Sawani Card No.

Name:

Date lost/stolen: Time:

Place:City: Country:

First Reported to:..... Date/Time:.....

Police Report obtained:

If abroad, current contact details:

Telephone No. C/o.....

Fax No.C/o.....

Times Available:.....

Do you need a replacement card?

Where do you want to pick it up from?.....

.....
Signature of Cardmember

4. Suggest A New Merchant

If there is a particular place/outlet that you patronize and they do not accept Diners Club card, please notify us by faxing this form and we will make contact and sign them up and keep you posted.

Your Name:
Card No. :

Name of outlet/merchant:
Location:
Type of business (e.g. restaurant):
Contact Person (if you know):
Contact telephone No.

Would you like if we refer your name to them?

.....
Signature of proposing cardmember

5. Card Replacement Request

Please replace my card due to the following reason:

- Defective magnetic stripe
- Damaged/Defaced Card
- (Please specify)

Cardmember Name :

Telephone :

Card Number :

A Customer Service Officer will follow up on your request and advise you on actions being taken.

6. Address Change Request

To change your address on our records, please print, complete and fax this form to 02-6520020:

Name :

Card Number :

Home Telephone No. :

Office Telephone no. :

Mobile No. :

Email Address :

New Mailing Address :

.....

.....

Effective From :

Signature :

Note : 1. Address of additional card (if any) will also be changed as above.

2. Please mail the original of this form to :
Diners Club International,
P.O. Box 7684,
Jeddah 21472

7. Request for Statement

Please print, complete and mail this form to process your request.

Name :

Card Number :

Telephone :

Email Address :

Required Statements for : Months Year

Signature :

Date :

Note : A charge of SR 25 will apply for requests of more than
three months' statements

8. Request for Charge Copy

If you wish to retain a copy of a charge(s) made to your card, please fill the form below:

Name :

Card Number :

Email :

Telephone No. :

Transaction Reference No.:

(Given in your statement)

Note:

1. A charge of SAR 25 will apply for each copy request.
2. For charges made abroad, it may take about 60 days before we receive the requested copy of transaction

9. Disputing A Charge

Please print, complete, fax this form to 02-6520040. And, mail it to following address along with a copy of your monthly statement:

Officer In charge Chargeback
Chargeback Unit
Diners Club International
P. O. Box 7684
Jeddah 21472

Dear Officer

I dispute the following transaction(s) appearing on my statement as per details given below:

Card Number :

Statement Month	Transaction Reference No.	Transaction Amount
.....
.....
.....

My dispute of the above transaction(s) is made on the grounds that I neither participated in the above transaction(s) nor did I authorize any person or organization to make the above charge(s) to my above numbered Diners Club card.

Name : Signature :

Note : Diners Club International will communicate if additional documents are required to continue our investigations on disputed charge(s).

10. Club Rewards Redemption Form

Please print, fill and fax to : 02-6520040

Your Card Number :

Name :

Item you desire to redeem:

1st Option :

2nd Option :

3rd Option :

Please note if you are a member of an airline miles or hotel program and want your Club Rewards points transferred to such a program, please write your membership number with program name.

.....
Cardmember's Signature

11. Yours Comments & Suggestions

Please fill and email to : info@dinersclubsaudi.com or fax to: 02-6520040

Your Name :

Diners Club Card Number (if any):

Mailing Address:

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Office Telephone No. Mobile No.

Fax No. :

Email Address :

Comments/suggestions/complaints:

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