



PRODUCT BUNDLE SUBSCRIPTION FORM

CUSTOMER DETAILS

First Name				Middle Name				Last Name			
Phone Number				Email Address							
Customer Number -CIF (if existing)								Date		Branch	
<input type="checkbox"/> New Application				<input type="checkbox"/> Account Conversion				Kindly convert my account <input type="text"/> to the option below			

KINDLY FILL THE APPLICABLE SECTION ONLY EITHER A, B OR C. PRODUCTS IN PART D ARE OPEN TO ALL CATEGORIES

A. PREMIUM SELECT BUNDLE

Premium Select Transaction Account opened? <input type="checkbox"/> Yes <input type="checkbox"/> No	Acc No. <input type="text"/>	(If no, kindly complete account opening form)
Visa Platinum Debit card available to you for free. Apply? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Visa Infinite Credit Card, joining fee waived. Apply? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Open IMS Account for Investment and International Wealth Management <input type="checkbox"/> Yes <input type="checkbox"/> No		
This product bundle entitles you to a Free AMREF Maisha Bronze Air Rescue Package in addition to other benefits. See brochure for details		

B. YOUNG PROFESSIONALS

Pay As You Go Transaction Account opened? <input type="checkbox"/> Yes <input type="checkbox"/> No	Acc No. <input type="text"/>	(If no, kindly complete account opening form)
*This account comes with a Free MyGoalz Account. It is easy and quick to open all by yourself via I&M Mobile.		
Debit card options <input type="checkbox"/> Ordinary Debit card as per tariff		
<input type="checkbox"/> Visa Platinum Debit (Annual Fee USD 5)		
<input type="checkbox"/> No card		

C. WE ALSO RECOMMEND THE FOLLOWING PRODUCTS - TICK AS DESIRED

<input type="checkbox"/> Home safe insurance (10% Discount) + Personal Accident Cover + Motor Insurance + Emergency Evacuation [This option grants you waiver of applicable Credit card joining fee]		
<input type="checkbox"/> International Travel Insurance	<input type="checkbox"/> Retrenchment Cover	<input type="checkbox"/> Medical Insurance
<input type="checkbox"/> Emergency Evacuation	<input type="checkbox"/> Child Education Policy	<input type="checkbox"/> Professional Indemnity
<input type="checkbox"/> Last Expense	<input type="checkbox"/> Golfers Insurance	
*You can obtain detailed information on the above insurance covers together with application process from your relationship manager or nearest Branch.		

Terms and Conditions of respective products apply . Kindly ask for a copy or access them on www.imbank.com

Customer Name	Signature	Date

FOR BANK USE ONLY

Confirmed by	Name	Signature	Date
Branch CSO			
RM			

FORWARD THIS FORM TO BANCASSURANCE AND/OR CARDS DIVISION ALONG WITH APPLICATION FORMS AS APPLICABLE