

Please choose the products you are applying for by marking it with an X. Please note that you can only select 1 of the following products: **Agility** Rewards & **Agility** Healthcard or **Agility** Rewards Platinum & **Agility** Healthcard



As one of our clients or stakeholders, your're our person, our buddy, our pal and we really like to show you just how much we care. So we're giving you an epic, not to mention FREE, wellbeing and rewards programme with fantastic benefits and discounts on a wide range of lifestyle products and services.

We're awesome, we know.



Like the name suggests,
Agility Rewards Platinum is the
cream of the wellbeing and rewards
crop, perfectly suited to your high
expectations.

Although you don't need to be a member of our rewards programme to have an **Agility** Healthcard, if you choose to sign up for the fantastic rewards of **Agility** *Rewards* Platinum, all your cash-back rewards will be paid into your **Agility** *Healthcard*. This means your savings potential just got a massive boost!



Agility Healthcard is a pre-funded Mastercard that allows you to take full control of your healthcare expenses. It's only valid at medical service providers and serves as the ideal tool to safeguard against unplanned medical expenses. Get additional cards for family members and have the option to pay-out your savings at the end of the year with this unique savings tool that is not linked to any medical scheme.



# PLEASE COMPLETE THE FOLLOWING

A. MEMBER DETAILS	S::																												
Are you part of an Em	ployer Gr	oup						 			 										 						YES	N	10
Name of employer gro	oup [																												
Are you part of the <b>Ag</b>	ility <i>Life</i> ¡	prog	ramı	me _				 			 										 					. [	YES	N	0
B. MEMBERSHIP AP	PLICATIO	ON																											
Name of Medical Scheme																													
Medical Scheme Membership no.																													
Surname			$\Box$																						Title				
First name(s) (in full)																													
ID no.																													
E-mail			$\Box$																										
Telephone (W)									Се	ell																			
Telephone (H)									Fa	х																			
Residential address														Pos	tal a	addı	ess												
				1	_		_			4		_				L				<u> </u>	<u> </u>	<u> </u>	<u>_</u>	_		Ļ	$\downarrow$		
								Cod	de _																Code	L		Ш	
	Depe	ndaı	nt(s)	full	nar	me							De	pen	dan	ıt(s)	ID	nun	nber			De	pen	dan	t(s)	cell	l num	ber	

Signature of applicant



# PLEASE COMPLETE THE FOLLOWING

C. EMPLOYER GROU	P DE	TAILS	S (On	ly ap	pplic	cable	for I	ne	mber	s joi	nin	g th	rou	gh t	heir	En	nplo	oye	r)														
Company Name																													$\prod$				
Company Reg No.		Τ			Т			T	T	Τ				Τ				T								Τ			Т	$\top$	Т		
Type of Industry								Ī																				Title	; [				
E-mail Company Contact Person					I			T T				1																	$\Box$	$\Box$			
Telephone (W)								İ		Cell																							
Telephone (H)										Fax												]											
Physical address															Po	osta	al ad	ddre	ess										_				
									Code	e																		Co	de				
on <b>Agility</b> <i>Rewards</i> No of regional offices											cor	nme	D		of 🔚			-		ү	Y	у	Y	tne	Agı	uty	не	aitne	arc	1:			
D. BROKERAGE / INT	ERME	DIAF	RY DI	ETAI	LS																												
Date of commencement D D M M Y Y Y Y  BROKERAGE / INTERMEDIARY DETAILS  ame of brokerage																																	
Brokerage code																													_				
Name of intermediary / consultant																																	
Intermediary code																																	
Broker consultant																																	
E. MEMBER DECLAR  I, the undersigned, here			that	the i	nfori	matio	on pro	ovic	led in	con	nec	tion	with	n this	apı	olica	atio	n, v	vhe	ther	· it b	e in	my	ıwo	n ha	ındv	vriti	ng o	or no	ot, is		<u> </u>	
and that I have not with application by <b>Agility</b> R	held a	any m																															
Name of principal mem	ber:																													$\perp$	$\perp$		
Signature of account he	older:								Date:																								
SIGN	ΙΛ	T		<b>D</b> [					D	D M	М	Υ	Υ	Υ	Υ																		



# TO BE COMPLETED IF YOU ARE APPLYING FOR AGILITY REWARDS PLATINUM

F. CONTRIBUTION CO	DLLE	ECT	ION	DE.	TAIL	_S (/	<b>Agili</b>	i <b>ty</b> R	Rewa	ırds	Plat	inun	n <b>Ap</b>	plic	ant	s ON	ILY)	)															
Name of bank																				Br	rar	ich na	me										
Account type																				В	Bra	nch co	ode										
Account holder																																	
Account number																						comn		Date cem		D	D	М	M	Υ	Υ	Υ	Υ
Agility Channel (Pty) Ltd Similarly, I authorise my will be processed by cor also understand that the to this SBSA service / de However, I understand the while this authority was regarded as receipt ther Cancellations: Please note that Agility of Section 14 (2) (b) (i) 8 cancelled by the member to state his / her intention such notice period and video of 2008).  I hereby agree to pay the may change from time to request.	banimput mput e deta e deta e deta e deta f lin for mput f Rev k (ii)	k to eer the ails of the correct the ails of the correct shadened and any cancel and the correct the c	debinrough for early mill no f such f	t my gh th ach w ultida t be ch an atinu tion e duri ne m l liab	accine Elevithd ata in entitinour m m 114 (3 ing semble for das pr	ount ectro rawa nstru tiled t nts w her a nemble said persh r a ro	with with onic I all will uction on an order of the I agreed overship. It is easo	n am Fund Il be n. Th ny rei lega e to Con- welv n sub nab	ound ds Tiprin his a fund fund advi	ts dra rans ted couthout of a wing se A  e effer P nontly vent ersh	awn fer son m rity moo i to m gility ective rote n pe	aga Serviny ba may unts Agiliti / Ch /e fo ction eriod e me	ainst ice (I ank s	it by EFTS state canc Agill nann nann el (Pri ixed (Act r by r act act act act act act act act act act	Agill S) symer ellectity el (Fty) L tterm : 68 mea know ted	ity C yster t or od by Rewe Pty) L ttd in of 20 ns of ns of whed in ac	than m proon a givir ards td. I writt 12 (to 1008) f a person coord	nel ( ovid n acc ng A Pla Rece viring c viring c	Pty) ed b ccom gility tinun eipt c of an  e) m sak writte he / ce wi e ter	Ltd y St par Charles (and (a charles of the charles	I. I tarnyii an di an di hai hai hai hai shai shai shai shai sh	under ladard I and vounel (Provision instruction of arity, in ice of ill remotion 1 and concide concid	star Ban uche ty) L of A ctior hat date t is i 1 (o ain 4 (4	nd the k of er. I a to do not have a control of the	at the South agree one cay Changlith occur occur occur occur occur of the am	e with Africa to palend anne anne anne characteristics, that that the fine Coasana awar	hdra ica ( pay a dar r el (Pt ann sub the mon ull n onsu	(here (here (here) (her	s her eafte coank th's v td) h Pty) L to th nbers iven bers Prof	eby r SB cha cha vritte ave ttd si bip thip feection t that	auth SA) rges in no with auth I I I I I I I I I I I I I I I I I I I	orise and relations relati	I ting rn eer ng ct
																						5	3	C	iN	ΙA	\ T	- [	JF	RI			
																				Sig	ına	iture c	of ac	ccou	nt h	older	:						_
G. MEMBER DECLAR I, the undersigned, hen and that I have not with application by Agility I Name of principal mem	eby on held Rewa	decl d any ards.																															
Signature of account he	olde	r:								Da	te:																						
SIGN	I	\ T	- [	JF	2	E				D	D	M	M	Υ	Υ	Υ	Y																



# TO BE COMPLETED IF YOU ARE APPLYING FOR AGILITY HEALTHCARD

Known as one of the industry's smartest healthcare savings solutions, the **Agility** Healthcard is a pre-funded Mastercard that allows you to take full control of your healthcare expenses. It's only valid at medical service providers and is the ideal tool to safeguard your bank balance against unplanned medical expenses.

Additional cards are requested and managed by the primary card holder. To distribute funds to the additional cards the primary card holder must call the call centre on 011 796 6464.

Best of all, you decide how much to save every month and you can boost your savings with **Agility** *Rewards* Platinum amazing cash-back rewards. Saving has never been easier.

#### Important notes:

FICA requirements for Agility Healthcard:

- · Certified copy of ID document
- As a group application the Employer may provide the following documents:
  - Confirmation of Employee's working status and gross income
  - Certified copy of employee's ID document
  - Signed Terms and Conditions
  - If non-SA national employee please provide a copy of working permit

Document)	ARI	J AL	וטכ	HON	IAL	CAI	ו עא	HOL	.DEF	((5)	) DE	IAI	LS (	note	e:	piea	ase	sui	omi	t co	pie	SC	υгр	orin	сір	aı a	s a	וסג	tior	iai a	app	ııca	nt(s	) Ide	∍ntii	ty	
Surname		$\mathbb{L}$			$\Box$									$\mathbb{T}$																		Ti	tle				
First name(s) (in full)		$\mathbb{L}$			$\Box$									$\mathbb{T}$																		Initia	als [				
ID number		I		I	$\Box$										Da	ate (	of b	irth	D	D	N	Л	M	Υ	Υ	′	Υ	Υ			G	Send	ier	M			F
E-mail		I			I																					T					$\Box$	$\Box$		$\Box$	I		
Telephone (W)		$\prod$			floor							Cel	ı																								
Telephone (H)					$\perp$							Fax	(																								
Physical address		floor	$\perp$	$\perp$	$\perp$									$\perp$				Р	osta	ıl ad	dre	ess						I		$\prod$							
				$\perp$																																	
											Code	e																				Со	de [				
I. CONTRIBUTION CO	ccount type Branch code																																				
Account type		L	L	L	L									L								Bra	nc	h co	ode						L	L	L	L	L		
Account holder	L	<u>_</u>	<u>L</u>											$\perp$														$\perp$		<u>_</u>	L	$\perp$	$\perp$	$\perp$	$\perp$		╛
Account number	L	L			L									L									Da	ate o	of ir	nce	otio	n [	D	D	M	M	Υ	Υ	Y	)	1
Monthly debit order for	Agi	lity	Hea	ılthca	ard		R															D	ate	e of	del	bit o	orde	r [	D	D	M	M	Υ	Υ	Y	)	1
I / We hereby request and account) or any variable a									ır acc	cour	nt wit	h the	abo	ve-n	nen	ition	ed b	ank	(or a	any (	othe	er b	ank	or	brar	nch	to w	hic	h I/w	√e m	ıay t	rans	fer m	ıy / c	ur		
I / We understand that the each withdrawal will be pr the Agreement. I / we agre	inted	d on r	my b	ank s	state	ment	and	indi	cated	l the	abb	revia	ited i	name	e A	gilit																					
Mandate: I / We acknowled personally.	∍dge	that	all p	ayme	ent ir	nstrud	ction	s iss	ued b	у у	ou sl	nall b	e tre	ated	l by	my	/ ou	r ab	ove-	men	ition	ned	Ba	nk a	is if	the	inst	ruct	tions	; hav	ve be	en i	ssue	d by	me	/ us	
Cancellation: I / We agre acknowledge that cancellathis Authority was in force	ation	of th	nis Au	uthori	ity ar	nd Ma	anda	ite w	ill not	car																									wn v	vhile	;
Assignment: I / We acknown assignment of the Ag																			eeme	ent is	s als	SO (	cede	ed o	or as	sigi	ned	to t	hat t	third	par	ty, bı	ut in 1	the a	bser	nce (	of
Name of principal men	nber	: [																										$\mathbb{L}$									
Signature of account h	ıolde	er:								D	ate:																										
SIGN	1/	Δ-	П		R	F					D I	D M	I M	Υ	Υ	/ Y	/ N	1																			



## **AGILITY HEALTHCARD TERMS AND CONDITIONS**

Your use of the Agility Healthcard, issued by Standard Bank, is subject to the following terms and conditions. Your use of the card constitutes an agreement between you (the cardholder) and us (PrePayCentral and Standard Bank), and it indicates that you understand and agree to comply with these terms and conditions. You acknowledge that no representative of Standard Bank or PrePayCentral has offered you any financial advice, nor have they influenced you in any way. Standard Bank subscribes to the Code of Banking Practice which is available from www.banking.org.za.

AS SOON AS YOU RECEIVE YOUR CARD, YOU MUST SIGN IT ON THE BACK USING PERMANENT INK TO ENSURE THAT NO OTHER INDIVIDUAL CAN USE YOUR CARD AND TO SHOW THAT YOU ACCEPT THESE TERMS AND CONDITIONS.

SHOULD YOU HAVE ANY QUERIES, PLEASE CONTACT THE AGILITY HEALTHCARD CALL CENTRE ON 011 796 6464.

#### 1. DEFINED TERMS

- 1.1 Association: Mastercard, and any other entity, through which the payment infrastructure required for processing transactions is accessed and/or by which the payment infrastructure required for processing transactions, is governed.
- 1.2 Association Rules: The rules and regulations published by the Association, as amended by the Association.
- 1.3 ATM: An Automatic Teller Machine that has electronic capabilities, accepts PINs and dispenses cash.
- 1.4 Bank: A branch of ABSA Bank
- 1.5 Standard Bank: Standard Bank Limited (Registration No.1962/000738/06), a bank registered under the Banks Act, 1990.
- 1.6 Card: The Agility Healthcard.
- 1.7 Card account: The national card account opened by PrePayCentral in respect of the cardholder for the purpose of allocating cardholder payments.
- 1.8 Cardholder: The person who has been granted a card account.
- 1.9 Cardholder prepayment(s): The amounts paid by the cardholder or its nominee into the card account.
- **1.10 Cell-phone:** Any Global System for Mobile Communications (GSM) enabled terminal capable of connecting to a GSM mobile network.
- 1.11 Card reference number: The 8 digit card reference number displayed on the reverse side of the card which must be used during the activation process and when making deposits.
- 1.12 PrePayCentral: PrePayCentral (Proprietary) Limited (Registration No. 2016/169366/07).
- 1.13 PrePayCentral group: PrePayCentral, any subsidiary of PrePayCentral's holding company and/or any subsidiary of PrePayCentral's holding company.
- 1.14 FICA: The Financial Intelligence Centre Act 38 of 2001.
- 1.15 Merchant: Any retailer, shop or any other entity that contracts with any Association member to accept cards and originate card transactions.
- 1.16 Merchant transaction: A transaction entered into between you and a merchant.
- 1.17 POS: A Point Of Sale terminal at a merchant.
- 1.18 Prepaid value: An amount equal to the amount that the cardholder or anyone else has paid into the card account.
- 1.19 Transaction:
  - 1.19.1 The payment for goods and/or services at POS at merchants in South
    Africa who accept Mastercard cards
- 1.19.2 Any other transactions, conducted by the cardholder using the card
   1.20 Mastercard: Mastercard Inc. (and all its subsidiaries and affiliates) or its successors and assigns.
- 1.21 We or Us: PrePayCentral and/or Standard Bank, and/or, if appropriate, any member of the PrePayCentral group.
- 1.22 Website: www.agilityrewards.co.za
- 1.23 You or Your: The cardholder.

#### 2. YOUR CARD

2.1 Standard Bank will always remain the owner of the card.

## 3. USING YOUR CARD

- 3.1 Only you may use your card. You may not allow anyone else to use it.
- 3.2 The card has an expiry date that is valid until the last day of the month shown on the card unless the card account is closed or the card is revoked under clause below before that date.
- 3.3 To activate your card, send a copy of your ID and proof of residence to info@healthcard or call the Agility Healthcard call centre on 011 796 6464. An Agility Healthcard representative will verify your details and activate your card.
- 3.4 The total Rand amount of purchases will be deducted from the card account.
- 3.5 Contributions may be made to the Agility Healthcard by EFT or debit order
- 3.6 When you make a deposit into your card account, PrePayCentral acts as your agent and, except insofar as there may be a right of recovery against PrePayCentral in law, all risks relating to the administration of the funds and the responsibility to ensure that PrePayCentral executes your instructions are yours.

- 3.7 You may not use the card for any illegal transactions including online gambling or similar transactions. You may not use your card for foreign exchange purchases nor may you use your card outside the Republic of South Africa. It is your responsibility to determine whether a transaction is lawful before you use the card. We will not be liable if a merchant refuses to accept or honour your card. We are obliged to report all illegal transactions to the relevant authorities.
- 3.8 We may suspend your card or terminate use of the card immediately if you violate any of these terms and conditions. In addition, should any regulatory authority request us to cancel the card, the card will be cancelled. Should this occur, we cannot be held liable in any way.
- 3.9 You agree that merchants are responsible for merchant transactions and that they are independent of us. We will not be liable if you have a complaint about goods or services paid for with your card. Complaints should be taken up with the merchant concerned.
- 3.10 Your monthly POS transaction limit is R25 000 (five thousand Rand).
- 3.11 Your maximum card balance may not exceed R25 000 (twenty five thousand Rand).
- 3.12 You must comply with all relevant legislation at all times, including legislation applicable to combating money laundering and we have a duty to report suspicions of money laundering using the card.

#### 4. UNAUTHORISED USE OF YOUR CARD

- 4.1 Notify the Agility Healthcard call centre immediately if you realise your card is lost, you are responsible for the safety of your Agility Healthcard. We will stop the card soon after being notified. Please acknowledge that, due to system delays, we may not be able to stop the card immediately.
- 4.2 You will be responsible for all payments made with the card before the card was stopped in terms of clause 4.1.
- 4.3 You indemnify us against any damages, loss or liability that we may suffer as a result of any unauthorised access and/or use of your card.
- 4.4 You may dispute that any purchase debited from the card account was authorised by you. We will investigate any dispute after we receive a sworn statement from you to the effect that you did not authorise the transaction. We will not be obliged to reverse the disputed transaction until we have completed our investigation. Should we conclude that the transaction was authorised by you, we shall not reverse the disputed transaction.

#### 5. MALFUNCTION OF ELECTRONIC FACILITIES

5.1 We will not be responsible for any loss arising from any failure, malfunction or delay in any POS device or any supporting or shared networks resulting from circumstances beyond our reasonable control.

#### 6. AUTHORITY TO DEBIT YOUR ACCOUNT

- 6.1 Any purchases you make using the card will be debited from the card account, whether or not the slips or vouchers are signed.
- 6.2 The merchant (and not us), will be liable if a transaction is not authorised.
- 6.3 Unless a reversal or chargeback is authorised under the relevant.

#### **Association Rules:**

- 6.3.1 We are unable to reverse or chargeback any payment.
- 6.3.2 Any dispute with a merchant regarding a reversal or chargeback should be resolved between you and that merchant.
- 6.3.3 All payments made by us to a merchant for any transaction are final and irreversible.

### 7. INTEREST AND FEES

- 7.1 We determine the monthly fee payable on the card, charged in advance.
- 7.2 You will be responsible for the cost of replacing any card.
- 7.3 Charges and fees will be debited from your card account. Your account balance must never enter into a debit balance. The account holder must ensure that sufficient funds are available to cover monthly fees charged against the member's account. The account holder is liable for settling any debit balance incurred on the card account.
- 7.4 A schedule of fees and charges applicable to the card are available from the website

#### 8. STATEMENTS

8.1 Monthly automated statements are sent provided we have the correct email

- address. Statements reflecting transaction history of the past 90 (ninety) days and balances are available from the website.
- 8.2 If you wish to request an additional statement with further history, please contact the **Agility** Healthcard call centre. A statement will be emailed to you.
- 9. APPLICABILITY OF ASSOCIATION RULES
- 9.1 We are subject to the Association Rules which may change from time to time. A copy of the Association Rules will be made available to you on request.
- 10. TERMINATING THIS AGREEMENT
- 10.1 You may terminate this agreement at any time. You must advise Agility Healthcard in writing if you want to close your card account and you must also destroy your card so it cannot be used again by cutting through the magnetic strip and account number. A card that is not destroyed correctly may still be used and, should this happen, you will be held liable for all transactions.
- 10.2 We may choose at any time to revoke your card or to close the card account.
- 10.3 If the card account is closed for any reason, we will transfer the remaining credit balance, less any applicable charges, to a bank account selected by you in writing. You will have no claim regarding the card account. However, any claim you may have regarding any credit balance on that card account up to the date of closure of the card account can be claimed from us.
- 10.4 Even if this agreement is terminated, we will be entitled to rely on any rights acquired by us under this agreement before it ended.
- 11. AMENDMENTS TO THESE TERMS AND CONDITIONS
- 11.1 In our sole discretion and at any time, we may amend these terms and conditions. Any amendment will not be interpreted as creating a new agreement
- 11.2 It is your responsibility to keep up to date with the latest terms and conditions, which are available on the website.
- 11.3 The amendments to the terms and conditions will be binding on you and will form part of these terms and conditions, on the earliest, 21 (twenty one days after they have been updated on the website or your use of the card. Should you not accept the amendments, you are entitled to terminate this agreement in terms of clause above.
- 12. ADDRESSES FOR NOTICES
- 12.1 The street address supplied to us by you will be regarded as your chosen address where notices may be given and documents in legal proceedings under this agreement may be served on you. It is your responsibility to ensure that the correct street address has been furnished. You must immediately notify us in writing if your address or any other relevant information changes.
- 12.2 You should send any legal notice to us at our chosen address: PO Box 1555 Fontainebleau 2032
- 12.3 You acknowledge that our agreement will be regarded as having been entered in the Republic of South Africa and any breach of this agreement and/or disputes relating to this agreement will be considered as having taken place within the Republic of South Africa.

#### 13. FICA

- 13.1 Standard Bank is regulated under FICA. Under the provisions of FICA, certain balance and transactional limits apply to your account: This product may only be used by South African citizens and South African residents.
- 13.2 You may not have a balance of more than R25 000 (twenty five thousand Rand) on the card and may not make payments of more than R25 000 (twenty five thousand Rand) in a monthly cycle.
- 13.3 We are obliged to suspend the transactional capability of your account if you exceed the limits described. You may not have a balance of more than R25 000 (twenty five thousand Rand) on the card and may not make payments of more than R25 000 (twenty five thousand Rand) in a monthly cycle.

#### 14. NO LIABILITY

- 14.1 You acknowledge and agree that:
  - 14.1.1 You have and shall have no rights of any nature to any funds held in any account which is unrelated to you.
  - 14.1.2 Despite anything to the contrary contained in these terms and conditions or otherwise, we shall have no liability of any nature and however arising to you.

#### 15. CONFIDENTIALITY

- 15.1 We will treat all your personal information as private and confidential (even when you are no longer a customer). Nothing about your account or personal information will be disclosed to anyone unless:
  - 15.1.1 We are legally compelled to do so
  - 15.1.2 It is in the public interest to do so
  - 15.1.3 The disclosure is made at your request and with your written consent
  - 15.1.4 You give us the necessary permission to store your personal information as provided by yourself to us
- 15.2 In order to process your transactions and to offer you better service, your personal information may be transmitted to a third party who may be in a foreign country. By accepting these terms and conditions you consent to the transfer of your personal information to such a third party.

#### 16. GENERAL TERMS AND CONDITIONS

- 16.1 You may not vary any of these terms and conditions.
- 16.2 South African law governs these terms and conditions.
- 16.3 Any favour or concession we may give you will not affect any of our rights.
- 16.4 We reserve the right to decline your application.
- 16.5 We may check by reference to third parties the correctness of any personal details given to us when activating your card and you consent to us doing so.
- 16.6 We have the right to request any further information or documents that we may legally require.
- 16.7 In the event of any contravention of the provisions of any South African law, you may be deprived of the use of the card.
- 16.8 If we take legal action against you to recover any amount due in terms of these terms and conditions, you will be liable for our costs (including all legal fees, collection commission and tracing fees) on the scale as between attorney and own client.
- 16.9 You agree that we may sue you in the Magistrates Court, even if the claim against you exceeds the jurisdiction of the Magistrates Court. You consent to the jurisdiction of the Johannesburg Magistrates Court, tracing fees on the scale as between attorney and own client.

### J. MEMBER DECLARATION

I, the undersigned, hereby declare that the information provided in connection with this application, whether it be in my own handwriting or not, is true and that I have not withheld any material facts which are known to me. A material fact is defined as a fact that is likely to impact the assessment of this application by **Agility** Rewards.

Name of principal member:																				
Signature of account holder:					[	Date:														
SIGNA	ΤL	JF	RE			D	D N	/I IV	1 Y	Υ	Υ	Υ								