

**BOV Visa Gold / Platinum Card
Priority Pass
Application Form**



Cardholder's Name:

Company Name *(if applicable)*:

Address

I.D. Card / Passport / Co. Reg. No.

BOV Visa Gold / Platinum Card No.

Once accepted as a Priority Pass member, I agree to abide by the relevant terms and conditions of use as found on www.prioritypass.com

Kindly note that the Priority Pass Cards are not automatically renewed. Please check validity of the card prior to travelling. Contact your nearest BOV Branch for further information.

Cardholder's Signature

Date

Kindly fill in this application form and forward to:

Bank of Valletta p.l.c.
Electronic Banking Unit
BOV Centre,
Triq il-Kanun,
Santa Venera SVR 9030
Malta