



AGILITY DOG ASSOCIATION OF AUSTRALIA LTD

ABN 83 070 415 404

CREDIT CARD ISSUE FORM

Cardholder Name

Position

I understand and agree that the Association Credit Card is issued to me on the express understanding that I will, at all times, comply with the following conditions.

USE

1. The Association Credit Card ('the Card') is the property of the Agility Dog Association of Australia Ltd and is in my possession and under my strict control.
2. I will not permit the Card to be used by any person other than myself.
3. I will only use the Card for official purposes and in accordance with the Association's Credit Card Policy.
4. I will immediately report any unauthorised use of the Card to the Issuing Authority and the Treasurer.
5. I will not use the Card to pay for expenses that have already been claimed (or will be claimed) by any form of allowance.

MONTHLY RECONCILIATION

6. I will be issued with a monthly statement by the Issuing Authority. I will:
 - o Ensure that all transactions that appear on the monthly statement are verified by me.
 - o Ensure that sufficient supporting documentation is attached to the monthly statement when it is submitted for approval (within 7 days of receipt).
 - o Verify that goods or services paid for using the Card have been actually delivered or provided.
 - o Sign the monthly statement provided by the Issuing Authority to indicate that the transactions appearing on the statement have been made only for official purposes.
7. If I know in advance that I will be absent or unavailable to validate expenses in the normal timeframe, I will provide documentation and receipts to the Treasurer in advance.

CHANGE IN CARDHOLDER DETAILS

8. I will immediately advise the Treasurer of any change in my name or contact details.

UPON RESIGNATION

9. I will immediately return the Card to the Treasurer if I resign, or if my services as an employee or volunteer of the Association are otherwise terminated, or if I am instructed to do so by the Treasurer.

LOST OR STOLEN CARDS

10. I will immediately report the loss or theft of the Card to the Issuing Authority and Treasurer.

DECLARATION

11. I confirm that I have access to only one Card.

12. I acknowledge that I have read the Association’s Credit Card Policy and have been briefed on all aspects of the operation and use of the Card.

Cardholder Signature

Signature of Authorised Card Issuer

Date