



For WI residents: If you are applying for individual credit or joint credit with someone who is not your spouse, combine your and your spouse's financial information on the application form.

1. APPLICANT INFORMATION: Please tell us about yourself.

Name (First-Middle-Last) Please Print			Date of Birth / /		Social Security Number - -		Home Phone Number ()		
Mailing Address Apt.# City State Zip				Time at Address Years _____ Months _____		Cell/Other Phone Number ()			
*If the above address is a P.O. Box, you must provide a street address for yourself or a contact person. <input type="checkbox"/> Your Address? <input type="checkbox"/> Contact Person?									
Contact Person Name			Street Address (Street Name and Number)			City		State Zip	
Housing Information <input type="checkbox"/> PARENTS/RELATIVE <input type="checkbox"/> RENT <input type="checkbox"/> OWN <input type="checkbox"/> OTHER		Alimony, child support or separate maintenance income need not be disclosed unless relied upon for credit.		Monthly Net Income From All Sources \$ _____		Time At Job Years _____ Months _____		Employer's Phone Number ()	Relative Phone Number ()
E-Mail Address (optional)					By providing an E-mail address, I consent to receive E-mail communications about my Account and authorize you to provide my E-mail address to the Retailer/Dealer/Merchant where I applied and the Retailer/Dealer/Merchant where my credit card is honored so that I may receive such communications, offers and updates.				

2. CO-APPLICANT INFORMATION: (COMPLETE ONLY IF CO-APPLICANT REQUESTING A "GE MONEY CREDIT CARD")

Name (First-Middle-Last) Please Print			Date of Birth / /		Social Security Number - -		Home Phone Number ()		
Mailing Address Apt.# City State Zip				Time at Address Years _____ Months _____		Cell/Other Phone Number ()			
*If the above address is a P.O. Box, you must provide a street address for yourself or a contact person. <input type="checkbox"/> Your Address? <input type="checkbox"/> Contact Person?									
Contact Person Name			Street Address (Street Name and Number)			City		State Zip	
Housing Information <input type="checkbox"/> PARENTS/RELATIVE <input type="checkbox"/> RENT <input type="checkbox"/> OWN <input type="checkbox"/> OTHER		Alimony, child support or separate maintenance income need not be disclosed unless relied upon for credit.		Monthly Net Income From All Sources \$ _____		Employer's Phone Number ()			
E-Mail Address (optional)					By providing an E-mail address, I consent to receive E-mail communications about my Account and authorize you to provide my E-mail address to the Retailer/Dealer/Merchant where I applied and the Retailer/Dealer/Merchant where my credit card is honored so that I may receive such communications, offers and updates.				

3. APPLICANT and CO-APPLICANT: We need your signature(s) below

I am providing the information in this application to GE Money Bank ("GEMB"), to dealers ("Dealers") that accept the GE Money Credit Card ("Card") and to program sponsors, and asking GEMB to issue me a Card. By applying for this account, I authorize and agree that:

- GEMB may furnish this and other information about me (even if my application is denied) and my account to Dealers and program sponsors (and their respective affiliates) to create and update their records, and to provide me with service and special offers.
- GEMB may make inquiries it considers necessary (including requesting reports from consumer reporting agencies and other sources) in evaluating my application, and for purposes of reviewing, maintaining or collecting my account.
- If my application is approved, the GEMB Credit Card Agreement ("Agreement"), a copy of which is attached, will be sent to me and will govern my account.
- Among other things, the Agreement: (1) **INCLUDES AN ARBITRATION PROVISION THAT MAY LIMIT MY RIGHTS UNLESS I REJECT THAT PROVISION UNDER THE AGREEMENT'S INSTRUCTIONS**; and (2) makes each applicant responsible for paying the entire amount of credit extended; and (3) grants GEMB a security interest in the goods purchased on the account as permitted by law.
- I consent to GEMB and any other owner or servicer of my account contacting me about my account, including using any contact information or cell phone numbers I provide (whether now or in the future), and I consent to the use of any automatic telephone dialing system and/or an artificial or prerecorded voice when contacting me, even if I am charged for the call under my phone plan.
- This application and the Agreement are governed by federal law and Utah law (to the extent that state law applies).

Federal law requires GE Money Bank to obtain, verify and record information that identifies applicants when opening an account. GE Money Bank will use applicants' name, address, date of birth, and other information for this purpose.

Please note that you must reside in the United States and be 18 years or older to apply.

Signature of Applicant X _____ Date _____		Signature of Co-Applicant (If Applicable) X _____ Date _____	
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FOR RETAILER USE ONLY (Validation of Customer I.D.)				VERIFIED BY:			
RETAILER #		ACCOUNT #		KEY #		AMOUNT OF INITIAL TRANSACTION	
APPLICANT 1 st ID TYPE/NUMBER <input type="checkbox"/> Driver's License <input type="checkbox"/> State Issued <input type="checkbox"/> Federal Government		ISSUANCE STATE		EXP. DATE		APPLICANT 2 nd ID (CREDIT CARD TYPE & ISSUER)	
CO-APPLICANT 1 st ID TYPE/NUMBER <input type="checkbox"/> Driver's License <input type="checkbox"/> State Issued <input type="checkbox"/> Federal Government		ISSUANCE STATE		EXP. DATE		CO-APPLICANT 2 nd ID (CREDIT CARD TYPE & ISSUER)	
RETAILER PHONE #		RETAILER FAX #		APPLICANT SIGNATURE MATCH <input type="checkbox"/> YES <input type="checkbox"/> NO		APPLICANT PHOTO MATCH <input type="checkbox"/> YES <input type="checkbox"/> NO	