

Credit Card Authorization (for first annual premium only, up to \$50,000)		
Please print		
Policy Number	Application Number	
Insured's Name	l .	
Mastercard Card Number Card Number		Expiry Date
the above policy number or application number of application number of this form, BMO® Insurance authorization is obtained from the issuer, you	will request necessary authorization from the	e issuer of your credit card. If such necessary nent to BMO Insurance by the issuer pursuant
Signature of Cardholder		Date signed (dd/mm/yyyy)
Cardholder's Name (please print)	