REPLACEMENT FORM
LOST / STOLEN FUN MILES PRO CARD

TO BE FILLED OUT BY CARDHOLDER:

FIRST NAME: _____

LAST NAME: _____

DATE OF BIRTH: _____

COUNTRY: _____

CARD # LOST/ STOLEN CARD 360 _ _ _ _ _ _ _ _ _

EMPLOYED BY: _____

I hereby declare that the above Fun Miles PRO card is no longer in my possession. It was either lost or stolen. I understand that it is a personal card and that therefore a duplicate card is not possible. I hereby request a NEW card @ NAf. 5,-.

_____ _____
Signature Cardholder Date

TO BE FILLED OUT BY EMPLOYER:

I hereby certify that the above mentioned person is employed at the above mentioned company, and therefore entitled to a new card.

NAME: _____

FUNCTION: _____

SIGNATURE: _____

DATE: _____

TO BE FILLED OUT BY TRADE ASSOCIATION or FUN MILES:

CARD # REPLACEMENT CARD 360 _ _ _ _ _ _ _ _ _

DATE: _____

HANDLED BY: _____