

SAFRAPOINTS
YOUR REWARDS PROGRAMME

AUTHORISATION FORM FOR COLLECTION OF REDEEMED VOUCHERS

I, _____ (member's name in NRIC) of _____ (Partial NRIC, last 3 digits and alphabet eg. 123A) hereby authorise _____ (name in NRIC) of _____ (Partial NRIC, last 3 digits & alphabet eg. 123A) to collect the _____ (Quantity) _____ (redeemed vouchers) on my behalf.

I and my representative understands that my original / copy of photo ID*, and my representative's original photo ID* will be requested for proof of identity at the point of vouchers collection. All identification document(s) will be returned immediately upon verification.

I confirm that my representative shall have the authority to sign the acknowledgment of the receipt of the redemption vouchers. I understand that I shall be fully responsible for the non-delivery if any, of the redeemed vouchers from my representative.

Member's Signature

Date

Note: Member is to complete and sign the authorisation form. Only original completed authorisation form will be accepted.

***Photo ID should consist of the photo, name and NRIC number of the individual.**

ACKNOWLEDGMENT OF REDEEMED VOUCHERS COLLECTED

I, member / representative of the member^ acknowledge that I have collected the redeemed vouchers from SAFRA in correct quantities.

Signature

Date

Name in NRIC : _____

Partial NRIC (last 3 digits & alphabet eg. 123A) : _____

^ Please delete/tick where appropriate

For Official Use only

Source JR MF TM TP YS PG

Issue By : _____ Signature : _____

Date : _____ Remarks : _____