

Change of Name Request

Tick next to the card/s that you would like to change your name. Enter your Customer ID or Account Number in the boxes provided.

<input type="checkbox"/>  Q Mastercard® Customer ID: <input type="text"/>	<input type="checkbox"/>  Q Card Account Number: <input type="text"/>	<input type="checkbox"/>  Flight Centre Mastercard® Customer ID: <input type="text"/>
<input type="checkbox"/>  Farmers Finance Card Account Number: <input type="text"/>	<input type="checkbox"/>  Farmers Mastercard® Customer ID: <input type="text"/>	

Tick the box that applies to your situation.

<input type="checkbox"/> I have married and have taken my partner's name	<input type="checkbox"/> I have entered into a civil union and have taken my partner's name	<input type="checkbox"/> I have divorced or separated and have reverted to my maiden name	<input type="checkbox"/> I have changed my name by deed poll	Date of Birth: <input type="text"/> / <input type="text"/> / <input type="text"/>
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Current Details

Mr.
 Mrs.
 Ms.
 Miss.
 Other: _____

Given names: _____

Family name: _____

Postal Address: _____

_____ City: _____ Postcode: _____

Phone Numbers: Day _____ Mobile _____

Email: _____

Please tick if you would like to receive promotional emails.

New Details

Your new details required on account.

Mr.
 Mrs.
 Ms.
 Miss.
 Other: _____

Given names: _____

Family name: _____

New Signature:	Date: / /
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Please note that we need the following evidence of your name change:

1. A certified copy of a Marriage Certificate, Civil Union or Deed Poll **along with**,
2. A certified copy of your NZ Driver Licence or NZ Passport which must be in your new legally chosen name.

Send this completed form with evidence of name change and supporting identification by scanning and email to: customer.care@flexicards.co.nz or post to FlexiGroup NZ Limited, Private Bag 94013, Auckland 2241.