

MARUKAI JCB CARD CREDIT APPLICATION



My Marukai Membership Status

マルカイメンバーシップ情報

Marukai Membership Number

I am a Current Marukai Member.
現在有効なメンバーシップをお持ちの方

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My Membership Has Expired.
以前メンバーだった方

I have never been a Marukai Member.
初めてメンバーになれる方

To ensure prompt processing, please print in ink and fill out completely. Any missing information may delay the processing of your application.
Note: To obtain a Marukai JCB Card account, you must be a resident of the state of California, Nevada, Oregon or Washington due to reasons by the issuer.

APPLICANT'S INFORMATION

First Name 氏名		Middle Initial	Last Name		Home Address ご自宅住所		City	State	Zip
Home Telephone Number お電話番号 ()		<input type="checkbox"/> Own Home 持ち家	<input type="checkbox"/> Live With Parents 両親と同居	Social Security Number ソーシャルセキュリティー番号		Date of Birth 生年月日	Mother's Maiden Name 母親の旧姓		Time at Current Address 現住所在住年数 Years Months
Are you a U.S. Citizen or Permanent U.S. Resident? 合衆国市民権または永住権をお持ちですか。 <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, Indicate Immigration Status Noの場合、ビザの種類		Name of Nearest Relative Not Residing With You ご親族名			Phone Number of Nearest Relative ご親族のお電話番号 ()		Time Currently Residing in the U.S. 米国在住年数 Years Months
Driver's License or State ID Number 運転免許証またはID番号		Previous Home Address, If Less Than Two Years in Current Home Address 日本のご住所					Previous Telephone # 日本のご連絡先 ()		
Employer or Business Name お勤め先			Employer or Business Address 勤務先所在地			City	State	Zip	
Employer or Business Telephone Number 勤務先電話番号		Occupation / Position 役職		<input type="checkbox"/> Self-Employed * 自営業 <input type="checkbox"/> Retired ご退職		If Self-Employed, Indicate Type of Business 自営業の場合、業種		Time at Current Employer or Business 勤続年数 Years Months	
Annual Gross Salary 税込年収 \$		Other Annual Gross Income ** その他税込年収 \$		Source of Other Annual Gross Income 収入源		Monthly Mortgage or Rent/家賃または住宅ローン月額 \$			

AUTHORIZED USER

If you want an additional card for another individual who is 18 years or older, please provide the following information about that individual. 家族会員カードをご希望の場合、以下にご記入ください。

First Name 氏名		Middle Initial	Last Name		Social Security Number ソーシャルセキュリティー番号または ID番号		Date of Birth 生年月日	Relationship to Applicant 本会員様とのご関係	
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* Self-employed applicants may be required to provide a copy of their latest signed Federal income tax return.
** Alimony, child support, or separate maintenance does not have to be revealed unless you choose to have it considered as a basis for repaying this obligation.

I, the Applicant, certify that all of the above information is accurate and complete and that I am eighteen (18) years or older. I also certify that I am a legal resident of the State of California, Nevada, Oregon or Washington due to reasons by the issuer. JCB International Credit Card Co., Ltd. ("JCB") is authorized to verify any of the information above and to obtain credit reports on me. If this application is approved, I agree to be bound to the terms and conditions of the JCB Consumer Credit Card Agreement and Disclosure for my account which will be sent to me with my card(s). I also agree that, I not the Authorized User, will be individually liable for payment of all amounts owing on the account, including any amount charged by the Authorized User.

JCB International Credit Card Co., Ltd.

By signing below, I certify that I have read, met and agreed to all the terms, conditions and disclosures on this application. I also authorize any employment, banking, and credit references listed above to provide any information to JCB.

X _____
Applicant's Signature お申込者署名 Date 日付

For JCB Use Only

AN	AS	DATE	<input type="checkbox"/> AP	CL	SRN
			<input type="checkbox"/> AU		
			<input type="checkbox"/> DC		

IMPORTANT CREDIT CARD INFORMATION

Annual Percentage Rate ("APR") for purchases	Other APRs	Variable Rate Information	Grace Period for Repayment of Balances for Purchases	Method of Computing the Balance for Purchases	Annual Fee	Minimum Finance Charge	Other Fees
17.4%* (See below*)	Cash/Check Advance: 17.4%* (See below*)	The APR may vary. The rate for purchases, cash and check advances is determined quarterly by adding 9.9% to the Prime Rate*. (See below*)	You have 25 days to repay your balance for purchases before a finance charge on purchases will be imposed provided you have paid your previous balance in full by the Payment Due Date.	Average daily balance (including new transactions)	None	None	Transaction Fee for Cash and Check Advances: 2% of the amount advanced with a minimum of \$2.00 Late Payment Fees: For Oregon or Washington: \$0.00 For California residents: \$10.00 For Nevada residents: \$25.00 Overlimit Fees: For California or Washington residents: \$0.00 For Nevada or Oregon residents: \$25.00 Dishonored Check Charge: For California or Washington residents: \$0.00 For Nevada or Oregon residents: \$25.00

*The Prime Rate used to determine the APR is the rate published in The Wall Street Journal on December 11, 2007, which was 7.5%. The APR may change quarterly on the first day of the billing cycle beginning in April, July, October and January, based on the Prime Rate on the second Tuesday of March, June, September and December. For Oregon or Washington residents, the APR will not exceed 12.0%. For California or Nevada residents, the APR will not exceed 18.0%. The information described in this application is accurate as of December 2007 but is subject to change. To find out what may have changed, call us at 800-366-4522.

Privacy Notice: Our Privacy Notice is available upon request. You may obtain a copy of the notice by calling us at 800-366-4522.

