

DEBIT CARD TERMS AND CONDITIONS

1. I hereby authorize Fidelity Bank to use phone number contact details provided on this form to amend their records after requisite verification. Fidelity Bank shall not use the phone number(s) you have provided and/or any other information for a purpose other than a purpose specified in these terms and conditions.”
2. I understand that the Card remains the property of the Bank and could be cancelled, withdrawn or the services terminated without notice to me. I will surrender it unconditionally and without reservation upon demand by the Bank.
3. I undertake to immediately inform Fidelity Bank, when the Card is lost, stolen or misplaced, giving details of the loss, theft or misplacement. Fidelity Bank would not be responsible in anyway whatsoever for any unauthorized transaction(s) on my account during this period.
4. I acknowledge that I have been informed by the Bank to perform a change of Personal Identification Number (PIN) at the nearest Fidelity Bank ATM upon receipt of the Card.
5. I undertake to immediately perform a Change of PIN at the nearest Fidelity Bank ATM.
6. Under no circumstances will I disclose my PIN to anybody, including Fidelity Bank staff, and Fidelity Bank will not accept any liability should I disclose my PIN to another person.
7. I hereby authorize Fidelity Bank to debit my account with fees in respect of the issuance, delivery, usage and renewal of the Fidelity Bank Card and with all transactions undertaken at the Point of Sale Terminals or ATMs with my Card and I take full responsibility for these transactions. Should I instruct Fidelity Bank to deliver the Card to the address provided by me through courier, I undertake to indemnify the Bank from any harm, actions, proceedings, claims, loss, damage, costs or expenses that may arise either directly or indirectly from the delivery of the Card.
8. I agree to accept Fidelity Bank’s receipt of withdrawals and transactions as conclusive and binding.
9. I understand that if my Card transaction (including online and overseas transactions, if applicable) is converted into foreign or local currency for purposes of the specific transaction (i.e. a service offered at certain ATMs and merchants which allows a card member to convert a transaction from local to foreign currencies, and from foreign to local currencies at the point of withdrawal/ sale), I hereby acknowledge that the process of conversion and the exchange rates applied will be determined by the relevant operator/ merchant or currency conversion service provider, as the case may be. Fidelity Bank Limited does not determine whether a card transaction will be converted into foreign or local currency and, where my transaction is for a retail purchase, I may have to check with the relevant merchant whether such conversion was effected and at what rate the conversion was effected. Fidelity Bank Limited shall not be liable for any currency exchange losses I may suffer as a result of the performance of a transaction as described herein.
10. Fidelity Bank reserves the right to apply a retrospective debit/credit adjustment to you to complete the settlement cycle of any such transaction based on prevailing exchange rates.
11. If my Card transaction (including online and overseas transactions, if applicable) relates to a prohibited transaction (which may include but shall not be limited to cryptocurrency or other block chain technologies howsoever described, Fidelity Bank shall not be liable for any currency exchange losses I may suffer as a result of the performance of a transaction as described herein. I also agree to indemnify and hold the Bank harmless against any and all liabilities, civil or criminal arising out of or in connection with my use of the Card in the manner aforesaid.
12. I understand that the Card may be captured by the ATM under the following circumstances;
 - a. Wrong entry of PIN beyond the permitted number of times
 - b. Technical Issue such as Power Outage, Network Challenge, ATM Malfunction amongst others
 - c. Card left in ATM reader after transaction
 - d. Session time out
 - e. Where the Card is flagged as “Stolen Card”, “Lost Card” or any other for which the Card may be captured
 - f. Expired or damaged Card used on ATM
 - g. Card appears to be fraudulent, including plain and cardboard cards amongst others
13. I understand that the Card, if captured by the ATM and same is not requested for or collected within two (2) working days, shall be blocked, disabled or released to law enforcement agencies.
14. I understand that if the Card is captured by the ATM, I should lodge a complaint via any of the means listed below within two (2) working days, after the Card was captured,
 - a. WhatsApp – 0245226400
 - b. Telephone – 0800 00 3355 (Toll Free)/+233 302 214490/ +233 302 81 9292
 - c. Email – wecare@myfidelitybank.net and
 - d. The Bank’s Branches Nationwide
15. I understand that I shall be required to provide any Acceptable Valid ID to enable me retrieve the captured Card.
16. Fidelity Bank reserves the right to vary these terms and conditions at its sole discretion and without notice to the applicant.
17. Fidelity Bank and its agents reserve the right to ask for proof of a Fidelity Bank Cardholder’s identity if the Card is presented at its teller counters or Merchant points.
18. These terms and conditions are governed by the laws of the Republic of Ghana.
19. By signing on this form, you have authorized Fidelity Bank to initiate automatic deductions for the full amount of the cost of card upon renewal.
20. By signing on this form, you agree to card request on your behalf by agent of the bank or bank staff (bank staff and agents of the bank such as DSAs, contact center, telesales, agency banking, etc) to request card on your behalf subject to verification by laid down system verification.

Date Card Ordered:

D	D	M	M	Y	Y	Y	Y
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Signature: _____

OFFICIAL USE ONLY

Branch Card Issuer Full Name: _____

Signature: _____ Date: _____

BOS / BSSM Full Name: _____

Signature: _____ Date: _____

Full Name of DSA/Smart Friend/Agent: _____

Signature: _____ Date: _____

Referral Code _____

Signature: _____ Date: _____

Name of Supervisor: _____

Signature: _____ Date: _____