

TENNESSEE BOARD OF REGENTS – CORPORATE TRAVEL CARD

Individual Account Application (VISA Corporate)

UMB
BANK
AGENT NUMBER 6220

THE UNIVERSITY OF
MEMPHIS

APPLICANT INFORMATION

Applicant Name (First, Middle, Last)		Email Address
Home Address		Social Security Number
City/State/Zip		Home Telephone Number ()
Employer/Institution Name		Position/Title
Gross Annual Income	Years There	Business Telephone Number ()

OTHER INFORMATION

Other Sources of Income: (Alimony, child support or separate maintenance need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)

BILLING ADDRESS IF OTHER THAN LISTED ABOVE:

Applicant Manager's Approval (if applicable): _____ Date: _____

APPLICATION AND AGREEMENT

Applicant applies to UMB Bank U.S.A. n.a. Falls City, NE, or its successors or assigns ("Issuer") for an account as indicated above. If this application is accepted and credit card(s) issued, those signing below will be deemed to be in agreement with the terms and conditions accompanying the card(s). The Applicant, in signing this form, certifies the information given herein to be true and correct and agrees to pay all charges on such account when due. The Applicant authorizes the Issuer to obtain and verify from time to time, credit, employment, and other information relating to the undersigned and to answer questions about the Issuer's credit experience with Applicant. The Applicant acknowledges and agrees that such information may be used to establish, administer or collect the account requested by the undersigned for any legitimate purpose relating to the account. The Applicant understands that the Issuer will retain the application whether or not it is approved. Because this account is offered in conjunction with the applicant's employment by an institution of the Tennessee Board of Regents, certain information about you and your use of the account will be supplied to your employer. Additionally, applicant acknowledges this credit card is to be used "For Official Business Only." By signing below, you consent to issuer sharing information you provide on your application and information about your account with your employer. Applicant agrees that unless they write to UMB Bank, U.S.A. n.a. P. O. Box 13262, Kansas City, MO 64199, UMB Bank and its affiliates may share information about the Applicant or the account for administrative purposes.

I have read the entire application, agree to its terms, and certify the information is correct.

APPLICANT'S SIGNATURE

DATE

Send completed applications to:

UMB Bank U.S.A., n.a.
P. O. Box 13262
Kansas City, MO 64199
ATTN: Jason Regehr

Phone: (816) 843-2259
FAX: (816) 843-2485

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DISCLOSURE INFORMATION

ANNUAL PERCENTAGE RATE FOR PURCHASES

Variable, 8.0% + Prime, which currently is 14.75%

VARIABLE RATE INFORMATION

Your Annual Percentage Rate (“APR”) may vary monthly. It is determined by adding a “Margin” to the highest “Prime Rate” reported in the “Money Rates” section of *The Wall Street Journal* on the 15th day of each January, March, May, July, September, and November.

GRACE PERIOD FOR REPAYMENT OF BALANCES FOR PURCHASES

You have not less than 45 days to repay the entire balance before a Finance Charge will be imposed, if full payment of both the prior balance and the current balance shown on your Current and Previous Monthly Statements are received within 45 days after the Statement Closing Dates for such statements. The entire balance due shown on each Monthly Statement must be paid in full each month.

METHOD FOR COMPUTING THE BALANCE FOR PURCHASES

Two-cycle average daily balance (including new purchases)

ANNUAL FEE

There is no annual fee for this account.

MINIMUM FINANCE CHARGE

Fifty cents (\$.50) for any Billing Period in which a Finance Charge is due.

OTHER FEES

Late Fee: None
Cash Advance Fee: 3% (\$3 minimum, \$20 maximum)

IMPORTANT: The information about the costs of the cards described above is accurate as of August 1, 2001, the date this document was printed. This information may have changed after that date. To find out what may have changed, write to us at UMB Bank, U.S.A., n.a., P. O. Box 13262, Kansas City, MO 64199-3262 or email us at our website at www.umb.com.

View these benefits online anytime at www.visa.com/benefits

Your VISA Card Guide to Benefits

Automobile Rental

Collision Damage Waiver Program

What is this benefit?

VISA Automobile Rental Collision Damage Waiver Program (“Auto Rental CDW Program”) provides – at no additional cost – coverage on a 24-hour basis for damage due to collision or theft up to the actual cash value of most rental vehicles when certain terms and conditions are met. Here are answers to some frequently asked questions about the program.

Who is eligible?

You are eligible only if you are a valid cardholder whose name is embossed on an eligible U.S.-issued VISA card. Only you and any additional drivers permitted by the car rental agreement are covered.

How do I activate this coverage?

For coverage to be in effect, you must:

- Initiate and complete the entire rental transaction with your eligible VISA card, and
- Decline the car rental company’s collision damage waiver (CDW/LDW) option, or similar provision, if offered by the car rental company.

Helpful hints:

- Check the rental vehicle for prior damage before leaving the car rental lot.
- Review the car rental agreement carefully to make sure you are declining CDW/LDW and also to familiarize yourself with the terms and conditions of the car rental agreement.

What if the car rental company insists that I purchase the car rental company’s car insurance or collision damage waiver?

Call the Program Administrator at **1-800-VISA-911** for help. If you are outside the United States, call collect at 0-410-581-9994.

What do I do if I have an accident or the rental vehicle is stolen?

Immediately call the Program Administrator at **1-800-VISA-911** to report the loss. The Program Administrator at VISA will answer any questions you or the car rental agency may have and will then send you a claim form.