BPI MEMBER-GET-MEMBER REFERRAL FORM

Date					
BANK	OF THE PHILIPPINE ISLAN	IDS Branch			
	Re: Participa	tion in BPI Member-Get-N	lember Promo		
Philipp	oine Islands' ("BPI") Memb	, , ,	gree to participate in the Bank of the omo") and in this connection, I confirm Program as follows:		
1.	Meet the minimum Total Relationship Balance ("TRB") of Php 100,000, Php 1,000,000.00 and Php 5,000,000.00 based on the overall volume in deposits and/or investments with BPI for NEXT by BPI Preferred, BPI Preferred and BPI Gold, respectively.				
Referi	rer Details				
	Full Name	Contact Number	Email Address		
Referral Registration Sheet					
	Full Name	Contact Number	Email Address		

By accomplishing the Referral Registration Sheet, I confirm that I have secured the consent of the Referrals indicated above.

By signing this form, I/we acknowledge that I/we have read, understood, and agreed to be bound by the BPI Member-Get-Member Promo Terms and Conditions. I/we likewise agree that all personal information of individuals related to me/us, my/our transactions, business and credit relationships, accounts or account information or records which are with BPI, made available to BPI, or are in possession of BPI or updated from time to time, may be collected, obtained, used, stored, consolidated, processed, profiled, benchmarked, shared with, and disclosed, by and between BPI and any member of the BPI Group of Companies, their successors and assigns, and their respective authorized representatives, agents and service providers, for any or all of the purposes described in the Data Privacy Statement published at https://www.bpi.com.ph/privacy and deemed incorporated by reference in this form.

Very truly yours,			
BPI Client:	Signature over Printed Name		
Signature verified by:	Signature over Printed Name		
TO BE FILLED OUT BY BP	I RELATIONSHIP MANAGER / BRANCH MANAGER		
Referrer 30-Digit RM Number			

Referral Full Name	Referrer 30-Digit RM Number