



THIRD PARTY FUNDS TRANSFER ENROLLMENT FORM

Instruction:

Send a scanned copy of this enrollment form to **onlinebanking-enrollment@bpi.com.ph** using your registered e-mail address in BPI Online. Otherwise, your enrollment will not be processed.

First Name: _____
Middle Name: _____
Last Name: _____
Deposit Account Number: _____

I would like to enroll the following Third Party account number/s in BPI Online's Funds Transfer facility:

Account Number	Account Name	Relationship	Purpose

By signing this document, I hereby expressly agree, consent, and authorize the Bank and/or its agents to obtain, collect, record, organize, store, use and access, any and all information relating to my Account(s) as described in BPI's Data Privacy Statement published online at <https://www.bpi.com.ph/privacy>.

I certify that all information provided here are true, accurate and complete, and I promptly agree to notify/update the Bank of any changes thereto.

I also hereby confirm that I have obtained the consent of the beneficiary/ies being enrolled in this form for his/her/their personal information to be processed for this specific purpose.

Please affix your signatures on the spaces provided.

<hr/> Signature Above Printed Name	<hr/> Signature Above Printed Name
<hr/> Signature Above Printed Name	<hr/> Signature Above Printed Name

We will process your request within 10 banking days from receipt of this enrollment form. Check your list of third party accounts after the said period. Requests received after 3:00 PM will be processed the next banking day.

Alternatively, you may also enroll your third party accounts for funds transfer at any BPI branch for BPI account holders or BPI Family Savings Bank branch for BFSB accountholders.

Thank you for banking with us!