

# CHANGE OF ADDRESS.

## Personal data

Last name

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First name

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Please indicate the last 10 digits of your card number

## New address

Street/no.

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ZIP code/place

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Telephone (home)

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Mobile phone

---

Telephone (business)

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E-mail

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I authorize Cornèr Bank Ltd. to use my e-mail address for its own marketing activities.

## Signature

Place/date

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Signature 

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Please complete this form in electronic format, print, sign and send to:  
**Cornèr Bank Ltd., Cornèrcard, Via Canova 16, 6901 Lugano**