

## Benefits of the American Wildlife Association Visa® Card

- **Up to 1 percent Cash Reward!** <sup>1</sup>
- **Low variable APR.**
- **Complimentary Year-End Summary** of Account Activity.
- **Online credit card access** to make payments and view account information.
- **Zero Liability Protection** from verified unauthorized purchases online and off.
- **Verified by Visa** personal password protection at participating online merchants.
- **Worldwide acceptance** at millions of places that accept Visa credit cards.
- **Auto Rental Insurance** automatically covers the repair or loss of a rental car, whenever you use your Visa card to pay for the car rental.
- **Travel Assistance Services** include pre-trip planning, roadside assistance, legal and medical referrals.

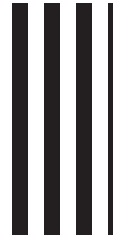


See reverse for important rate, fee, and other cost information.

Certain exclusions and conditions may apply to the benefits listed above.

<sup>1</sup> See Cash Rewards Program Rules for Details

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO. 467 KANSAS CITY, MO

POSTAGE WILL BE PAID BY ADDRESSEE:

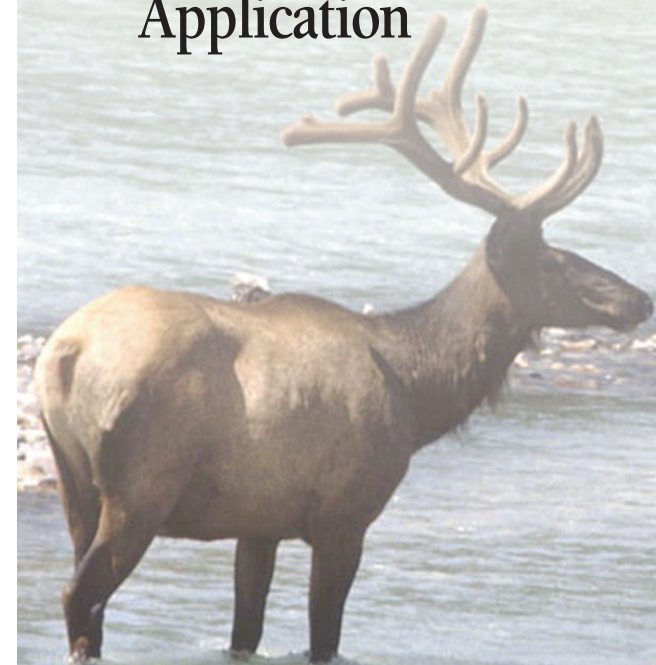
**CARD SERVICES**

PO BOX 419734  
KANSAS CITY MO 64179-0626



American  
Wildlife  
Association

Visa® Platinum  
Credit Card  
Application



A P P L I C A N T				
Name (first, middle, last)			Mother's Maiden Name (For Security Purposes Only)	
Address				
City		State	Zip Code	Home Phone
How Long Yr.	Mo.	Rent Own <input type="checkbox"/>	Housing Payment \$ /mo.	Date of Birth
Name of Bank			Social Security Number	
Type of Account			<input type="checkbox"/> Checking <input type="checkbox"/> Savings	
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.			Other Income Amount (per month) \$	
Employer			Gross Annual Salary	
Position		Years There	Business Phone	
Name and address of nearest relative not living with you				

C O - A P P L I C A N T				
Name (first, middle, last)			Social Security Number	
Employer			Years There	Business Phone
Position			Gross Annual Salary	Relationship to Applicant (if any)
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.			Other Income Amount (per month) \$	
<b>NOTE: When you furnish Applicant and Co-Applicant information and each such person signs below, you indicate your INTENT TO APPLY FOR JOINT CREDIT. Each person can use the account, and each person is liable for the debt.</b>				
I have read the entire application, agree to its terms, and certify the information is correct.				
<b>X</b>		<b>X</b>		
APPLICANT'S SIGNATURE		DATE	CO-APPLICANT'S SIGNATURE	

**DISCLOSURE**

Applicant(s) applies to UMB Bank, n.a., Kansas City, Missouri, or its successors or assigns ("Issuer") for an Account as indicated above. If this application is accepted and credit card(s) issued, those signing above will be deemed to be in agreement with the terms and conditions accompanying the card(s). Each 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.

Each Applicant authorizes the Issuer to obtain a credit report in connection with this application and from time to time after the Account is established, the Issuer may verify that the Applicant(s) continues to qualify for the Account. Issuer may verify Applicant(s) credit, employment history and other information relating to the Applicant(s) and to answer questions about the Issuer's experience with each person. Each Applicant acknowledges and agrees that such information may be used to establish, administer or collect the Account requested by the undersigned, or for any legitimate purpose relating to the Account. The Applicant understands the Issuer will retain the application whether or not it is approved.

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT**  
To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an Account. What this means for you: When you open an Account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

OPTIONAL PAYMENT PROTECTION PLAN			
<b>YES</b> , I wish to protect my credit card account in the event of disability, unemployment or death by enrolling in the optional Payment Protection Plan at a cost of 54.8 cents per \$100 of my outstanding monthly balance. (Kansas residents, see Payment Protection Plan Disclosure Statement for cost.) I acknowledge that I have received the Payment Protection Plan Disclosure Statement with this form. I also understand that enrollment is voluntary and I am free to cancel at any time.			
<b>X</b>	_____ / _____ / _____	_____ / _____ / _____	
Initial Here to Enroll	Date of Birth	Form J455-0104	Policy Forms ML-00021/11215/11216

**PAYMENT PROTECTION PLAN DISCLOSURE STATEMENT**

The Payment Protection Plan makes a monthly benefit payment if you, the Primary Cardholder, become disabled or unemployed (loss of job, strike or layoff) for more than 30 consecutive days. It can also pay the unpaid balance on your account if you or your insured Co-cardholder should die while insured. All benefits are based on your account balance on the date of loss and do not include amounts (including insurance charges) added to your account after your loss. The monthly benefit payment will be calculated by multiplying your account balance on the date of loss by the minimum payment percent required by the creditor. The monthly benefit payment may not be enough to pay the required minimum monthly payment on your account. All benefits are payable up to \$5,000 (\$7,500 Platinum accounts) or the sum of your unpaid balance at the time of loss, whichever is less. During months that you have a credit card balance, the cost is 54.8¢\* (50.2¢ if you do not need life coverage for a co-cardholder) per \$100 of your outstanding monthly balance and this charge is automatically included on your monthly statement. All coverage ends at age 70. After enrollment, you will be sent a personalized Certificate of Insurance. Coverage under this program is not available in AL, CA, CO, FL, MA, MD, MN, NC, NJ, NM, NY, PA, TX, VA, and VT. We will notify you if you enroll in the program and reside in a state where coverage is not available.

\*Kansas Residents: Your cost is 57.8¢ (53.2¢ if you do not need life coverage for a co-cardholder) and you must be under age 66 to enroll.

To qualify for Unemployment benefits, you must register with a recognized employment agency or your state unemployment office within 30 days after the date you become unemployed. Unemployment benefits are not payable if you resign, retire or become disabled.

**IMPORTANT INFORMATION DISCLOSURE STATEMENT:**  
This insurance is not a deposit or other obligation of, or guaranteed by, UMB Bank, n.a. or an affiliate of UMB Bank, n.a.  
This insurance is not insured by the Federal Deposit Insurance Corporation (FDIC) or any other agency of the United States, UMB Bank, n.a. or an affiliate of UMB Bank, n.a.  
UMB Bank, n.a. MAY NOT CONDITION AN EXTENSION OF CREDIT ON EITHER:  
Applicant's purchase of an insurance product from UMB Bank, n.a. or any of its affiliates; or  
Applicant's agreement not to obtain, or a prohibition on applicant from obtaining, an insurance product from an unaffiliated entity.

This program is offered, administered and underwritten by Central States Indemnity Co. of Omaha, of Omaha, NE and also underwritten by Central States Health and Life Co. of Omaha, NE; and Fidelity Security Life Insurance Co. of Kansas City, MO.

### IMPORTANT INFORMATION

<b>Annual Percentage Rate (“APR”) for Purchases</b>	3.90% during 6 month Introductory Period. Thereafter, <b>14.90%</b> . This APR is a variable rate, as explained below.
<b>Other APRs</b>	<u>Cash Advance APR</u> : 3.90% during the 6 month Introductory Period. Thereafter, 18.90%. This is a variable rate, as explained below. <u>Penalty APR</u> : During the 6 month Introductory Period, the Penalty APR is determined by adding 8% to the Introductory APR. After the Introductory Period, the Penalty APR for Purchase Advances is determined by adding 8% each APR otherwise in effect. The Penalty APR for Cash Advances is determined by adding 6% to each APR otherwise in effect. See explanation below. <sup>1</sup>
<b>Variable Rate Information</b>	Your APR may vary. The regular APR for Purchases is determined monthly by adding 9.40% to the Prime Rate. The regular APR for Cash Advances is determined monthly by adding 13.40% to the Prime Rate. The Prime Rate will never be less than 5.25%. See explanation below. <sup>2</sup>
<b>Grace Period for Repayment of the Balance of Purchases</b>	At least 25 days when you pay your balance in full each month.
<b>Method of Computing the Balance for Purchases</b>	Two-cycle average daily balance (including new purchases).
<b>Annual Membership Fee</b>	None.
<b>Minimum Finance Charge</b>	Fifty cents (\$0.50).
<b>Late Payment Fee</b>	From \$15 to \$39, depending on amount of New Balance.
<b>Other Fees</b>	Over-the-credit-limit fee: \$35. Cash Advance Fee: 3% of Cash Advance amount (\$10 minimum, no maximum on the amount of the fee). Other fees may apply.

<sup>1</sup> The Penalty APR applies to accounts in which payment is more than 30 days past due. The Penalty APR will apply until your payment history has been satisfactory for 6 consecutive monthly Billing Periods.

<sup>2</sup> The Prime Rate used to determine the APR for Purchases and for Cash Advances is the highest Prime Rate published in *The Wall Street Journal* on the fifteenth (15<sup>th</sup>) day of each month, or the next business day, if the 15<sup>th</sup> falls on a weekend or holiday, provided, however, that the Prime Rate used to determine the APR for Purchases and for Cash Advances will never be less than 5.25%. The periodic rate finance charge for Purchase Advances and Cash Advances will not exceed 25% Annual Percentage Rate.

**Cardholder Agreement.** For additional information about the costs and terms of the Account, see Issuer's Cardholder Agreement, which will be sent with the Card. The Cardholder Agreement and the Account will be governed by Missouri and applicable federal law, but Issuer will rely on the provisions of Nebraska law with respect to the fees and charges (other than interest) that apply to your Account, as authorized by Missouri Revised Statutes Section 408.145. The Cardholder Agreement permits the Issuer to change the terms of this Account, including the rates, fee and other credit terms, upon notice to cardholder and subject to the provisions of applicable law.

**Important Information About Procedures For Opening A New Account.**  
Our bank complies with Section 326 of the USA PATRIOT Act. This law mandates that we collect and verify certain information about you while processing your Account application. Please ask a Bank representative if you have questions.

**Important.** This information about the costs of credit cards is accurate as of March 1, 2005, the date this document was printed. This information may have changed after that date. To find out what may have changed, call us at 800-821-5184 or write to us at UMB Bank, n.a., P.O. Box 419734, Kansas City, Missouri 64141-6734.

Moisten Strip, Fold and Mail.