

Discover Network Participant Administrator Designation and Authorization Form for Discover® Guardian

We, the "Participant" (Organization named below), designate the following individual(s) as Participant Administrator(s) ("PA") and Participant Requestors ("PR") for Discover Guardian. As a Participant, we understand we must designate at least two PAs and one PR. Each PA is responsible for identification, authentication and notification processes between Participant and Discover Network as it relates to the service(s) herein. This may include the issuance of user credentials (a user ID and password) in order to participate in products and specifying the services users may access. In addition, after access has been granted, each PA will be responsible for all actions to be taken on behalf of Participant in use of products. Discover Network may rely on and act upon instructions or other information related to the services specified below that Discover Network receives from (or reasonably believes has been received from) the PA, until Discover Network receives (and has had a reasonable time to act upon) a written amendment or revocation of this authorization. The PA and PR also have specific roles defined within the Discover Guardian tool.

Discover Network and each Participant hereby represent and warrant that any nonpublic personal information of cardholders received or verified in process of using any Fraud Prevention Solution will not be used for any purpose other than fraud prevention. Each Participant hereby further represents and warrants that cardholders consented to such Participant's use and sharing of any nonpublic personal information with Discover Network and Card Issuers solely for fraud prevention purposes.

By submitting this application, you acknowledge that Discover is providing the services available in the Fraud Account Center as a convenience to you, and agree that Discover shall have no liability to you or any other party for any errors, or failures to provide services, that you experience as a result of your use of such products, including, without limitation, improper or fraudulent transactions that you may receive, directly or indirectly, from any source. You agree that the terms and conditions (available upon log in to the Discover Fraud Account Center) related to the use of such products, and of any other agreements you have with Discover, shall govern the use of the products.

The Discover Guardian fee is a monthly volume-based fee that helps support the network's costs associated with cross-border fraud monitoring. This 5 basis-points fee is applied on the Net Sales Amount clearing through International Interchange Rate Qualification category. This line item is indicated as "Discover Guardian" within your Monthly Issuer Settlement Report.

Participant Administrator	Participant Requestor
The PA is the Approver within Discover Guardian whose access includes approving or declining threshold requests from Requestors, performing all Requestor activities (but cannot approve their own request) and submitting requests to add users and/or revoke user to Discover.	PR is the Requestor within Discover Guardian whose access includes submitting the threshold requests for the Participant, managing alert settings and receiving alerts.

Section 1-Participant General Information (All Fields Required)

Participant/ Organization Name				
Street Address				
City, State, ZIP Code				
Country				
Telephone Number Main location number with area-code	Country Code	Area Code	Phone Number	Extension
Fax Number	Country Code	Area Code	Phone Number	Extension

Section 2 - Participant Administrator Profile *Required Fields

PA Name*	First	М	Last
PA Title*		1	
PA Email Address* Must be a valid individual corporate e-mail address.			
Participant Sub-organization (Not required if same as Participant Name)			
Street Address* Do not specify a P.O. Box number			
City, State, ZIP code*			
Country			



Discover Network Participant Administrator Designation and Authorization Form for Discover® Guardian

Telephone Number*	Country Code	Area Code	Phone Number	Extension
Fax Number*	Country Code	Fax		
PA After-Hours Telephone Number** Direct telephone number with area-code	Country Code	Area Code	Phone Number	Extension

Participant Administrator Profile *Required Fields

PA Name*	First		MI	Last	
PA Title*					
PA Email Address* Must be a valid individual corporate e-mail address					
Participant Sub-organization (Not required if same as Participant Name)					
Street Address* Do not specify a P.O. Box number					
City, State, ZIP code*					
Country					
Telephone Number*	Country Code	Area Code	Phone Number		Extension
Fax Number*	Country Code	Fax			
PA After-Hours Telephone Number** Direct telephone number with area-code	Country Code	Area Code	Phone Number		Extension

Section 3 – Authorized Signature - (All Fields Required)

Official Authorized Signature Must have signatory authority for the Participant and cannot be the same person as the PA or PR designated herein.					Application will not be processed without the appropriate signature
Name	First		МІ	Last	
Date					
Telephone	Country Code	Area Code	Phone Numb	per	Extension
Individual Email Address Must be a valid individual corporate e-mail address					
Title					

Please email, mail, or fax completed and signed original paper version of form to:

GlobalFraudSolutions@discover.com

Discover Network

Attn: Global Fraud Solutions

2500 Lake Cook Rd. Riverwoods IL, 60015 FAX: 1-847-521-1258

^{**}While this field is not mandatory, it is highly recommended in order to conduct business outside of normal business hours. If this information is not provided, it could lead to a delay in services this PA manages.



Discover Guardian User Management Form

User One:

Name	First	М	Last		
Phone	Country Code	Area Code	Phone Number	Extension	
Individual Email Address Must be a valid individual corporate e-mail address				1	
Changes to User Access:	☐ Add User	☐ Remove User	Change Access		
User Two:					
Name	First	MI	Last		
Phone	Country Code	Area Code	Phone Number	Extension	
Individual Email Address Must be a valid individual corporate e-mail address			- 1		
Changes to User Access:	☐ Add User	☐ Remove User	Change Access		
User Three:					
Name	First	MI	Last		
Phone	Country Code	Area Code	Phone Number	Extension	
Individual Email Address Must be a valid individual corporate e-mail address					
Changes to User Access:	☐ Add User	☐ Remove User	Change Access		
User Four:					
Name	First	MI	Last		
Phone	Country Code	Area Code	Phone Number	Extension	
Individual Email Address Must be a valid individual corporate e-mail address			·		
Changes to User Access:	Add User	Remove User	Change Access		