



SICAV NAME OR ISIN CODE (□): _____

The investor is the person who subscribes. All shareholder mailings will be sent to the address provided here.

1. General information on investor (mandatory)

Identification

Title	Mr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	<input type="checkbox"/>
Surname	<input type="text"/>	<input type="checkbox"/>	First Name(s)	<input type="text"/>	<input type="checkbox"/>		
Date of birth	<input type="text"/>	<input type="checkbox"/>	Minor	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Place of birth	<input type="text"/>	<input type="checkbox"/>	Country of birth	<input type="text"/>	<input type="checkbox"/>		
Nationality	<input type="text"/>	<input type="checkbox"/>	Occupation	<input type="text"/>	<input type="checkbox"/>		
Sector of activity	<input type="text"/>	<input type="checkbox"/>	Estimated annual income	<input type="text"/>			
Origin of funds	Savings	<input type="checkbox"/>	Inheritance	<input type="checkbox"/>	Sale of real estate	<input type="checkbox"/>	Other: _____ <input type="checkbox"/>

Residential Address (please note that "PO Box" and "Care of" are not accepted)

Street/No	<input type="text"/>	<input type="checkbox"/>				
Postcode	<input type="text"/>	City	<input type="text"/>	Country	<input type="text"/>	<input type="checkbox"/>

Mailing Address (if different from Residential Address)

Street/No	<input type="text"/>				
Postcode	<input type="text"/>	City	<input type="text"/>	Country	<input type="text"/>

Contact details

Telephone number	<input type="text"/>	<input type="checkbox"/>	Fax number	<input type="text"/>
Contact person	<input type="text"/>	E-mail address	<input type="text"/>	

Tax

Tax identification n°	<input type="text"/>	Tax Residence country	<input type="text"/>
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Political Exposed Persons

Political Mandate (PEPs*)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="checkbox"/>
If "Yes"	Please detail the mandate				

Reporting (reporting is sent either by mail or by fax)

Reporting language	English	<input type="checkbox"/>	French	<input type="checkbox"/>	German	<input type="checkbox"/>	Italian	<input type="checkbox"/>	Spanish	<input type="checkbox"/>
	Norwegian	<input type="checkbox"/>	Dutch	<input type="checkbox"/>	Swedish	<input type="checkbox"/>	Mandarin	<input type="checkbox"/>	Polish	<input type="checkbox"/>
Reporting currency	USD	<input type="checkbox"/>	EUR	<input type="checkbox"/>	GBP	<input type="checkbox"/>				
	NOK	<input type="checkbox"/>	PLN	<input type="checkbox"/>	HUF	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>		
Reporting by fax	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Fax number	<input type="text"/>				

In case of dividends, payment should be

Paid to my bank	<input type="checkbox"/>	Reinvested	<input type="checkbox"/>
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(*) PEPs (politically exposed person) are individuals who are or have been entrusted with prominent public functions in a foreign country, for example Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations [and] important party officials.

SECTION 2: INTERMEDIARY INFORMATION (mandatory if the investor submits his Application Form through an intermediary) The

intermediary is the financial company through which the investor submits his application form, before sending it to **Trustedfx-Traders**

1. General information on intermediary / distributor (mandatory if the investor submits his Application Form through an intermediary)

Intermediary Name					
Intermediary Registered Office Address (please note that "PO Box" and "Care of" are not accepted)					
Street/No					<input type="checkbox"/>
Postcode	<input type="checkbox"/>	City		Country	<input type="checkbox"/>
Mailing Address (if different from Registered Office Address)					
Street/No					
Postcode		City		Country	
Intermediary Contact details					
Telephone number			Fax number		<input type="checkbox"/>
Contact person				E-mail address	
Regulation					
Is the intermediary regulated?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="checkbox"/>
If "Yes"	Name of the regulatory body				<input type="checkbox"/>
	Regulator web site address of the page showing the name of the intermediary				<input type="checkbox"/>

2. Declaration concerning KYC / AML controls done by the intermediary (mandatory if investor submits his Application Form through an intermediary)

The intermediary confirms that, to the best of its knowledge and on a best efforts basis, it has given itself the appropriate means and internal procedures to prevent and avoid utilisation of the intermediary for purposes of money laundering (i.e. any activity involving the investment, concealment or conversion of the direct or indirect proceeds of criminal activities as listed in Luxembourg law) or terrorism financing, and to detect and intercept money laundering channels or chains.

- We substantiate, on the basis of probative official documents, the true identity of (a) all our clients, both regular and occasional, including investors into funds for which we act as intermediary and for which BNP Paribas Securities Services, Luxembourg Branch acts as Transfer Agent, and (b) where our clients are not acting on their own behalf, of economic beneficiaries (ie. beneficial owners) and (c) the authorised representatives of the clients hereinafter collectively referred to as the "Client"
- We retain register opening and Client identification documentation for a period of at least 5 years after the end of our relationship with the Client.
- Client identification documents shall be promptly made available to BNP Paribas Securities Services, Luxembourg Branch, Transfer Agency on their request
- Our procedures to prevent money laundering include the monitoring of Client transactions, including the monitoring of the source and destination of funds, the review of the purpose and object of the transaction, and, with a risk-based approach, apply enhanced checking procedures to transactions which we identify as unusual in their size, conditions or nature
- We are aware of the European Community watch lists contained in regulations concerning identification and declaration of business relations with suspected terrorist groups, persons or entities, or country subject to embargo, and we have checked and will monitor that the Client does not appear on such watch lists
- Our officers and employees comply strictly with all related procedures and controls in place
- We hereby certify that we (a) are not a *shell bank* within the meaning given to these terms under US legislation (USA PATRIOT Act: Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism Act) and (b) do not accept *shell banks* as a client
- We are aware of the terms of the Prospectus of the relevant funds and we shall observe them. In particular we shall not allow the purchase or holding of units or shares of the Funds by persons not authorised to purchase or hold them under the provisions of the Prospectus
- We shall not advertise for clients, solicit clients, or sell any of the funds for which BPSS Luxembourg Branch acts as Transfer Agent, unless we may do so in compliance with the laws and regulation applicable in our country or in other countries where such advertising, solicitation, offer or sale takes place including any regulation requiring registration of the Fund with the competent authority

Application Form for a private investor
Please complete the document in capital letters
MANDATORY FIELDS ☐

Please tick hereafter:

We do comply with all the above declaration There shall be deemed reiterated at the time of any order placed with Trustedfx-Traders and shall continue throughout the period of our client's holdings in the fund for which Trustedfx-Traders securities services acts as Transfer Agent.		We do not comply with all the above declaration	<input type="checkbox"/>
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The intermediary commits to inform Trustedfx-Traders in case it ceased to be regulated

3. Signature section (mandatory if investor submits his Application Form through an intermediary)

Intermediary Signature		<input type="checkbox"/>
Signatory Name		<input type="checkbox"/>
Intermediary Stamp		<input type="checkbox"/>