



VT MUNRO SMART-BETA UK FUND APPLICATION FORM - INSTITUTIONAL

PLEASE READ THE PROSPECTUS PRIOR TO COMPLETING THIS APPLICATION FORM

PERSONAL DETAILS BLOCK CAPITALS

Address	
	Postcode
Contact Name	
Contact Number	

JOINT APPLICANT(S) (if applicable - maximum four)

Name	
Signature	Date
Name	
Signature	Date
Name	
Signature	Date

DESIGNATION (Maximum of 15 characters)

OEICS may not be registered in the name of a minor (under 18 years of age) but should be registered in the name of an adult and designated in favour of the minor using the child's initials eg John Brown a/c RB. Please state the designation in the box below

Designation

INVESTMENT

Please indicate the amount you wish to invest in the OEIC(s). (Please note the minimum initial investment for each OEIC)

OEIC	AMOUNT TO INVEST	MINIMUM INITIAL INVESTMENT	OEIC	AMOUNT TO INVEST	MINIMUM INITIAL INVESTMENT
Income Shares Class A	£ <input type="text"/>	£1,000	Accumulation Shares Class A	£ <input type="text"/>	£1,000
Income Shares Class B	£ <input type="text"/>	£100,000	Accumulation Shares Class B	£ <input type="text"/>	£100,000
Income Shares Class X	£ <input type="text"/>	£250	Accumulation Shares Class X	£ <input type="text"/>	£250

VERIFICATION

Please provide an authorised signatory list for the institution for which the investment will be registered. This must be certified by at least one of the authorised signatories included in that list and accompanied by adequate identification documentation. If you have any queries as to what information to provide for verification purposes, please call 0134 388 0344.



PAYMENT

Funds should be wired for value on the settlement date of this transaction which will be stated on the Contract Note issued to you by Valu-Trac Administration Services. If funds are received on any date other than this agreed settlement date they may be returned by the Bank.

Pay direct to: BANK OF SCOTLAND
 Address: 90 High Street, ELGIN IV30 1BJ
 Account Name: VALU-TRAC INV MGT LTD – ACD DEALING A/C
 Account Number: xxxxxxxx
 Sort Code: xx-xx-xx
 IBAN: xxxx xxxx xxxx xxxx xxxx xx
 Bank account number can be obtained from Valu-Trac Administration Services

INCOME PAYMENTS

Please indicate how you wish to have the income paid:

DIRECT TO BANK/BUILDING SOCIETY - please give payment details

Bank or Building Society

Branch Title

Account Name

Account Number

Sort Code - -

RE-INVESTMENT

DATA PROTECTION

For full information on how VT processes personal information and what your rights are, please see our Privacy Policy online at www.valu-trac.com.

DECLARATION AND SIGNATURES

- I/We have read and understood the terms of the Prospectus.
- I/We understand that Valu-Trac may need to use the credit reference/information agencies in order to satisfy Valu-Trac's statutory money laundering obligations. These agencies may keep a record of this enquiry.
- I/We confirm that all applicants are at least 18 years of age.

Signature - APPLICANT 1	Date of Birth (dd/mm/yyyy)	Date (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature - APPLICANT 2	Date of Birth (dd/mm/yyyy)	Date (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature - APPLICANT 3	Date of Birth (dd/mm/yyyy)	Date (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature - APPLICANT 4	Date of Birth (dd/mm/yyyy)	Date (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>