

MUTUAL FUND



SUBSCRIPTION FORM

Please tick (x) **Individual** **Corporate**

Please tick (x) **GMMF** **NEF**

PERSONAL DETAILS OF APPLICANT(S)

Full name (or Joint Names where appropriate, as written on the Unit Certificate)

Title Name Surname

AND

Full name of joint applicant (Where applicable)

Title Name Surname

AND

Full name of child

Surname Date of Birth

OR

Name of corporate applicant

Name of Corporate Applicant

RC Number

Address (Street or Postal Address)

Telephone Number(s)

Email Address

NOTE: If you wish to purchase Units of The Fund for a child under 18 years, please write the child's full name and date of birth under your full name in the space provided

INVESTMENT DETAILS

Are you an existing Unitholder? Yes No

Income Distribution: Cash Reinvestment

You wish to invest the sum of:

DECLARATION BY APPLICANT(S)

I/We Declare that:

1. I/we am/are 18 years and over;
2. I/we have forwarded evidence of payment of the amount I/we have pledged to invest to the designated bank details provided below;
3. I/we understand that as with all capital market investment, the yield/bid and offer prices of this Fund may go up or down and that past performance is not necessarily an indication of future performance

I agree that:

1. If Units of the fund are redeemed within relevant holding period from the day of purchase, the manager shall deduct a handling charge based on the net redemption value
2. Statements and reports on investment will be made available periodically by the fund manager or on demand

IF APPLICANT IS A CORPORATE BODY, PLEASE ENSURE TWO AUTHORSIED SIGNATORIES SIGN, STATE THEIR DESIGNATION AND APPLY COMPANY SEAL

Signature	Date	Designation	Signature	Date	Designation

IMPORTANT INFORMATION FOR NEW SUBSCRIBERS

1. The minimum investment is for 100 units, with subsequent multiples of 50 units
2. Foreign currency subscribers are advised to contact the Fund Manager, Greenwich Asset Management Limited, for the applicable US dollar exchange rate on the day the remittance is being effected
Telephone: +234 1 631 094-2; +234 1 631 0929 **Email:** assetmanagement@gtlgroup.com

PAYMENT INFORMATION

Mutual Fund:	GREENWICH PLUS	NIGERIA ENTERTAINMENT FUND
Bank name:	STANBIC IBTC BANK	UNITED BANK FOR AFRICA PLC
Account name:	STL TRUSTEES/GREENWICH PLUS A/C	UBA NOM – UTL TRUSTEES/ NIGERIA ENTERTAINMENT FUND
Account number:	0018928791	1020780895
Sort code:	221150522	033153513

REQUIRED KYC DOCUMENTS

1. Valid Identity Card of Signatory(s) (Data Page of International Passport; Driver’s License etc.)
2. 2 recent Passport Photographs of Signatory(s)
3. Proof of address (Copy of utility Bill e.g. PHCN, LAWMA, Water bill etc.)
4. Certificate of Incorporation (for Corporates)
5. Duly completed Subscription Form

BANK DETAILS

Bank Name: _____

Account Name: _____

Account Number: _____

BVN: _____

FOR FUND MANAGER'S USE ONLY

AMOUNT PAID	OFFER PRICE	NUMBER OF UNITS ALLOTTED

The Fund Manager

