

†† If Initial charge % is not specified, no reversals will be allowed (Field not for branch use)

branch _____

Date _____

Additional deposits

Initials (Individuals only) Surname / Name of enterprise

Home telephone (dialling code and number)

Business telephone (dialling code and number)

Existing account number

Deposit amount **M**

Broker 1 Name _____ †† Initial charge % _____ Number

Amended customer details (attach proof of any name change, e.g. copy of marriage certificate)

Unit Trust account number

Title (Mr, Mrs, Miss, etc.) _____ Initials

Forenames _____

Surname/Name of enterprise _____

Passport/Registration number

Date of birth/registration

Postal address _____

Postal code

Home telephone number _____

Business telephone number _____

Amended signing arrangements

Powers of attorney/Mandates/Forms enclosed

Customer's approval

Customer's signature _____ Date _____ Branch date stamp _____

Assisted by (for persons under legal disability) _____

For Lesotho Unit Trust use only

Initials _____
Prepared by _____ Checked by _____ Operator _____