

# APPLICATION FORM INDIVIDUAL CLIENTS



Please complete the sections below in BLOCK CAPITALS

## SECTION 1 - PERSONAL DETAILS

### Individual Applicant First Holder

### Joint Applicant Second Holder

Title: Mr./Mrs./Ms.

Title: Mr./Mrs./Ms.

Name:

Name:

Surname:

Surname:

NIC / Passport No.:

NIC / Passport No.:

Occupation:

Occupation:

Address:

Address:

Telephone:

Mobile:

Telephone:

Mobile:

Email:

Email:

## SECTION 2 – SUBSCRIPTION DETAILS

Total Amount (MUR):

Entry Fee (MUR):

Net Amount after Entry Fee (MUR):

Net Amount in words:

## SECTION 3 – PAYMENT DETAILS

### Option A: Cash

Cash (MUR):

### Option B: Cheque drawn in favour of Century Sharia Fund Ltd

Bank Name:

Cheque Number:

### Option C: Bank Transfer

#### 1. Remitting Bank

Bank Name & Branch:

Account Number:

**SECTION 3 – PAYMENT DETAILS (CONT'D)**

Please complete the sections below in **BLOCK CAPITALS**

**2. Receiving Bank Details**

Beneficiary: Century Sharia Fund Ltd

Bank Name: State Bank of Mauritius Ltd

Account Number: 61030100053676

IBAN: MU45STCB1170030100053676000MUR

Address: State Bank Tower, 1, Queen Elizabeth II Avenue, Port Louis, MAURITIUS

**SECTION 4 – DECLARATION**

- I/We wish to make an initial investment of MUR \_\_\_\_\_ in shares of CENTURY SHARIA FUND LTD and enclose a payment in favour of the Fund.
- I/We understand that no cash payments are accepted for subscription. Any payment should be made by cheque or bank transfer.
- I/We understand that shares will be allocated to me/us at the ruling Subscription Price at the time my/our payment is received at the office of the Distributor (Century Banking Corporation Ltd) and is accepted by it.
- I/We have read the Offer Memorandum and fully understand the terms and conditions and realize the risks of investing in the Fund.
- I/We understand that subscriptions or redemptions paid in currencies other than the designated currency of the Fund (MUR) will be converted into MUR and I/We agree that any exchange/conversion losses or costs will be for my/our account.
- Please note that initial payment may be effected by cheque together with this application form or the first payment received through the telegraphic transfer will be considered as the initial payment.

First Applicant

Name:

Date:

Second Applicant

Name:

Date:

**SECTION 5 – SUPPORTING DOCUMENTS**

- National ID Card / Passport
- Utility Bill\*

\* Not more than 3 months old

**OFFICE USE ONLY**

Subscription Amount (MUR):

Input by:

Subscription Price (MUR):

Authorised By:

Shares Allocated (Number):