



T. Bailey Growth Fund LITE Unit Trust Application Form

T.BAILEY

Before completing your application form, you must read the Simplified Prospectus which contains important information about your investment. Additional copies can be obtained from T. Bailey Fund Managers Limited, 64 St. James's Street, Nottingham NG1 6FJ, at www.tbailey.co.uk or by calling the T. Bailey helpline on 0115 988 8213.

Please complete the application form in blue or black ink and in BLOCK CAPITAL letters. Failure to correctly complete relevant sections of the application form may delay or invalidate your application.

The completed application form should be returned, along with the correct payment, to Dealing and Administration, T. Bailey Fund Managers Limited, 64 St. James's Street, Nottingham NG1 6FJ. T. Bailey Fund Managers Limited is authorised and regulated by the Financial Services Authority.

1: Agent Details

To be completed by your agent if appropriate.

Address

 Postcode

Consultant's Name

FSA Reference No. Intermediary Number (T. Bailey Reference)

Telephone Number

Email Address

Advice Given? (tick one)
 Y N

Dealing Terms - 149 bps TER unit class only (see section 3)*

Agent Initial Commission	Agent Trail Commission
<input type="text"/> %	<input type="text"/> 0.50 %

* In the absence of any special instructions standard terms will be applied (see Simplified Prospectus). No commission is payable on the 99 bps TER unit class. If none of the advice given boxes are ticked, it will be assumed that advice has been given.

2: Personal Details

Please complete the personal details for all applicants in full. Note that we can accept applications from up to 4 joint holders for a unit trust investment. Details of the first 2 applicants should be completed below. If more than two names are to be used, tick here and provide the personal details of applicants 3 and 4 on a separate sheet of paper. Purchases for children under 18 years of age should be registered in the name of an adult and may be designated if desired. Contract notes are sent to all unitholders but six monthly statements and short reports are only sent to first named unitholders.

2A: Personal Details

Please tick if an existing unitholder Account Number

Title First Name(s)

Surname

Permanent Residential Address

 Postcode

Email Address

Daytime Telephone Number

Date of Birth (DD-MM-YYYY) Password of your choice (for security reasons) (6-10 characters)

If you wish to designate the account for example if you are investing on behalf of a minor, please insert the designation here.

For Trustee Investments please insert the name of the Trust/Pension Fund/Charity here.

2B: Personal Details

Please tick if an existing unitholder Account Number

Title First Name(s)

Surname

Permanent Residential Address

 Postcode

Email Address

Daytime Telephone Number

Date of Birth (DD-MM-YYYY) Password of your choice (for security reasons) (6-10 characters)

Data Protection Policy
 Any information which you provide may be held by T. Bailey Fund Managers Limited and used for administration purposes and to inform you about other products and services offered by T. Bailey Fund Managers Limited and its group companies. You understand that by providing us with this information, you consent to us processing it for these purposes. If you do not wish to receive information from us or our group companies about other products and services, please tick here:

EU SAVINGS DIRECTIVE REQUIREMENT (Please only complete this section if you are a European citizen and not resident in the UK)

Place of birth

Country of residence

Do you have a tax identification number? Yes No

Tax Identification number

If you do not have a tax identification number please enclose your original passport or official identity card which will be returned to you.

Money Laundering

Applications will be subject to the United Kingdom's verification of identity requirements which are contained in the Money Laundering Regulations 2007, the Serious Organised Crime and Police Act 2005, the Proceeds of Crime Act 2002 and the Terrorism Act 2000, the Bank of England Sanction Notices and the FSA Handbook. To comply with these regulations, we may need to request additional evidence of identity from you. We may use a credit reference agency who will record that an enquiry has been made. We reserve the right to refrain from investing your money and to withhold any repayment of capital until adequate evidence of identity under these regulations has been provided.

If you require any assistance with your application please:

call us on 0115 988 8213

email us at clientservices@tbailey.co.uk

Please post your completed form to:

Dealing and Administration
T. Bailey Fund Managers Limited
64 St. James's Street
Nottingham NG1 6FJ

CHEQUES SHOULD BE MADE PAYABLE TO T. BAILEY FUND MANAGERS LIMITED

3: Investment Details

We wish to invest in the T. Bailey Growth Fund LITE as detailed below:

Fund choice	Lump sum min £1000	Monthly min £50 (fill in DD form below)
T. BAILEY GROWTH FUND LITE (99 bps TER)	£	£
T. BAILEY GROWTH FUND LITE (149 bps TER)	£	£

If you are not investing through an agent, or the agent used in section 1 is not intending to take initial commission/trail commission, investment should be made into the 99 bps TER unit class.

Alternatively if Agent in section 1 is taking initial commission/trail commission, investment must be made into the 149 bps TER unit class.

Important Information

Cheques should be made payable to T. Bailey Fund Managers Limited

Please ensure that for lump sum investments you include a correctly completed cheque with your application form as failure to do so may delay or invalidate your investment.

Monthly savings investors must also complete a Direct Debit Mandate Form and enclose a cheque for the first payment. Direct Debits are taken on or around the 15th of the month.

Please also note that cheques:

- should either be drawn on a personal bank account held in the name of the applicant, or from a building society with the applicant's name clearly displayed on the face of the cheque;
- should have your full name and address clearly written on the reverse of the cheque; and,
- should not be post-dated.

4: Regular Withdrawals/Annual Automatic ISA Investments

Details available on request. Forms are available to download at www.tbailey.co.uk.

5: Declaration

Please read this section carefully before signing and dating the Declaration. This is our standard declaration upon which we intend to rely. For your own benefit and protection you should read these terms along with the T. Bailey Funds Simplified Prospectus carefully before signing. If you do not understand any point please ask your advisor or T. Bailey for further information. Failure to sign will mean your application form cannot be processed.

- I/We declare that the information contained in this application form, and any additional pages completed by me/us* is correct to the best of my/our* knowledge and belief and I/we* undertake to notify T. Bailey Fund Managers Limited without delay of any changes to these particulars.
- I/We confirm that I/we* have read and understood in full the information contained in this application form and the Simplified Prospectus (and have kept a copy of both for my/our records) and that these documents constitute the agreement between me/us* and T. Bailey Fund Managers Limited and I/we* agree to be bound by the terms and conditions contained therein.
- I/We request T. Bailey Fund Managers Limited to act in accordance with my/our* instructions. I/We* understand that this application is subject to acceptance by T. Bailey Fund Managers Limited and that T. Bailey Fund Managers Limited accepts no responsibility for any loss incurred as a result of any delay in the submission of the Application Form.

*delete as applicable

First Applicant

Signature

Date (DD-MM-YY)

Second Applicant (if applicable)

Signature

Date (DD-MM-YY)

Third Applicant (if applicable)

Signature

Date (DD-MM-YY)

Fourth Applicant (if applicable)

Signature

Date (DD-MM-YY)

Instruction to your Bank/Building Society to pay by Direct Debit

To be completed by monthly investors ONLY. Please complete and send to T. Bailey with your application.



To the Manager. Name of bank or building society

Address

Postcode

Name(s) of Account Holder(s)

Account No.

Sort Code

Reference No. (office use only)

Originator's Identification No.

Instruction to your Bank/Building Society and signature(s)

Please pay T. Bailey Fund Managers Limited, Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee, attached to the Simplified Prospectus. I understand that this instruction may remain with T. Bailey Fund Managers Limited, and if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

Date (DD-MM-YY)