



Investment Plan

Total investment (Rs.):

Payment Method By Cash By Cheque Cheque Number Bank

Please tick the desired investment Plan

Guardian Acuity Equity Fund Guardian Acuity Money Market Fund Guardian Acuity Money Market Gilt Fund
Rs Rs Rs

Personal Details

	Applicant 1 (Sole / primary)	Applicant 2 (Joint / secondary/ guardian)
Name of Applicant (Mr., Mrs., Ms., Other) / company		
Address of applicant / company		
Telephone / Mobile		
NIC / Passport / company registration no.		
Account Number		
E-mail address		

Returns of these units maybe (please tick the relevant box – *Only for first Investment in Fixed Income fund*)

Sent to my above address Credited to my bank account Account no. _____
 Re-invested into units Name of Account _____
Name of Bank _____
Branch _____

I / we hereby acknowledge that I / we have read the attached Terms and Conditions and agreed to accept them and I / we confirm that the above details are correct.

Authorized Signature _____ Signature (sole applicant) / Company Seal
Signature Verification _____ Signature (joint applicant) _____ Date _____

- Instructions :**
1. Please retain the Deposit slip. Unit Trust confirmations will be sent only after Units creation.
 2. Attach the Copy of National ID Card, signature verified by the Branch
 3. Attach copy of the Cash/Cheque Deposit forms
 4. Attach Form C, Copy of standing Instructions if you wish to subscribe to the regular Investment scheme

Branch
seal

Branch
Code
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Reference No. _____