

# ADDITIONAL APPLICATION FORM

**Note:** This form **can not** to be used for an initial investment application, including existing Firetrail investors who want to invest in a different Firetrail fund. Please complete the Application Form and if applicable, include existing account number in section 1 of the Application Form.

Please note additional investment requests received prior to 12:00pm Sydney time (on a Sydney business day) are deemed to be received that day, requests received after 12:00pm Sydney time are deemed to be received the next business day.

## Investor Details

Account number \_\_\_\_\_

Account name \_\_\_\_\_

Trustee name (For Funds/Trusts) \_\_\_\_\_

## Fund Information

Please accept this additional investment request with respect to my/our investment in the below Fund(s):

Fund Name	APIR Code	Amount in \$
Firetrail Absolute Return Fund – Class A units	WHT5134AU	
Firetrail Australian High Conviction Fund – Class A units	WHT3810AU	
Firetrail Australian Small Companies Fund - Class A units	WHT3093AU	

Minimum additional investment is \$5,000 per Fund, or as agreed with the Responsible Entity. You may investment a minimum of \$200 via a regular investment plan. To set up the regular investment plan, please complete the Regular Investment Plan form.

## Payment Details

### Payment Method:

- Electronic Funds Transfer, or
- Cheque

Payment is to be made in Australian Dollars by cheques or through the following accounts by Electronic Funds Transfer ('EFT'):

### EFT:

<b>Currency</b>	AUD
<b>Country</b>	Australia
<b>Payee</b>	RBCIS Firetrail [Investor Name]
<b>BSB:</b>	012 003
<b>Account Number:</b>	837 262 125

### Deposit reference for EFT:

Please quote your deposit reference number

**Cheque:** Cheques should be crossed "Not Negotiable" and made payable to: **RBCIS Firetrail [Investor Name]**

Please note that you will incur a fee if your cheque is dishonoured.

## Authorisation

I/we can confirm that I/we have read and understood the latest Product Disclosure Statement and Additional Information to the PDS to which this request applies. *Please ensure that this form is signed according to the authority assigned to the account.*

**Signature** \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Full Name \_\_\_\_\_

Capacity: (e.g. director, trustee) \_\_\_\_\_

**Signature** \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Full Name \_\_\_\_\_

Capacity: (e.g. director, trustee) \_\_\_\_\_

**Signature** \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Full Name \_\_\_\_\_

Capacity: (e.g. director, trustee) \_\_\_\_\_

**Signature** \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Full Name \_\_\_\_\_

Capacity: (e.g. director, trustee) \_\_\_\_\_

**Post:**

[Fund Name]

C/- RBC Investor services Trust- Registry Operations GPO Box 4471  
SYDNEY NSW 2001

**Fax:**

[Fund Name]

C/- RBC Investor services Trust- Registry Operations  
**+612 8262 5492**