Passport photograph

EQUATORCAPITAL

EQUATOR FUND MANAGEMENT NOTE

Name:
Address (not P. O. Box):

Telephone (Mobile): Home: Birthday:
E-mail Address:
Next of Kin:
Amount Invested:

FOR JOINT ACCOUNT HOLDERS

Name(s) of Joint Account Holders:
Address:

I/We certify that the above information is correct and hereby authorize and request you to open an account in my/our name(s).

I/WE AGREE

1. To abide by the terms and conditions governing the operations of fund.
2. That termination before maturity attracts a discount of 5%.

Dated the day of Year

Signature(s)

DOCUMENTATION

1. One clear passport photograph of Signatories.
2. Identification (e.g International Passport, Driver's License, National I.D Card)
3. Certificate of Incorporation (for corporate accounts only)
4. Such other documents as may be required from time to time.

FOR OFFICIAL USE ONLY

Account Opened: Account Number:
Initial Deposit:
ID Information:
Signature(s) Verified by:
Approving Officer:
Relationship Officer: