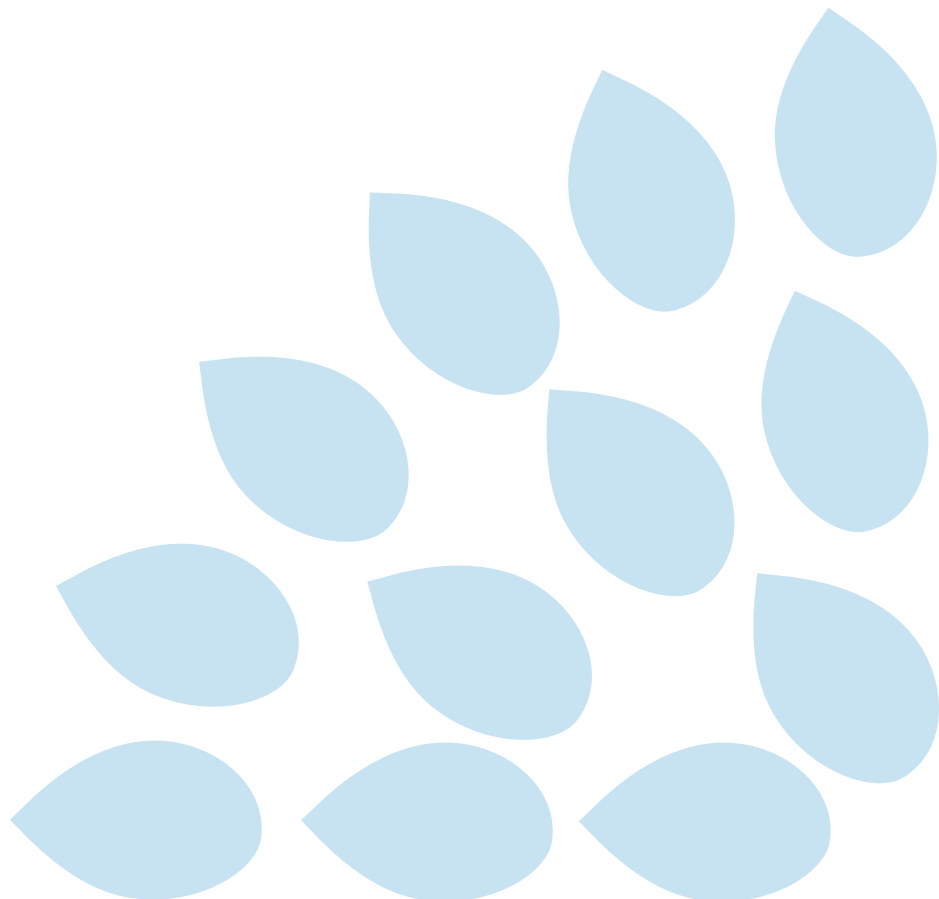




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# REGULAR SAVINGS PLAN AMENDMENT FORM

PROFIT WITH PRINCIPLES



This form is to be used to amend an existing Regular Savings Plan. Before you sign this form, please make sure you have read an up-to-date version of the Key Investor Information Document (KIID) for each fund into which you wish to invest. To begin a new Regular Savings Plan please use the appropriate full application form.

Please complete all sections and return to:

**EdenTree Investment Management Limited, PO Box 3733, Swindon SN4 4BG**

## PERSONAL DETAILS – APPLICANT ONE

Title (Mr/Mrs/Miss/Ms/Dr/Revd/Other)

Surname

Forename(s)

Company name

Existing account number

Account designation (if applicable)

Has your permanent residential address or tax residency changed since your original application? (If Yes, please provide full details)

Yes

No

## PERSONAL DETAILS – APPLICANT TWO (if applicable)

Title (Mr/Mrs/Miss/Ms/Dr/Revd/Other)

Surname

Forename(s)

Company name

## REGULAR SAVINGS PLAN INSTRUCTION

From the next amendable collection date, please register my Regular Savings Plan to collect and invest as outlined below:

Please tell us how you would like your investment split

### Fund

Minimum investment  
£50 per fund per month

Amity European Fund

£

Amity International Fund

£

Amity Sterling Bond Fund

£

Amity UK Fund

£

Higher Income Fund

£

UK Equity Growth Fund

£

**Total investment**

£

## DECLARATION

I confirm that I have read and understood the EdenTree Investment Management Supplementary Information Document, the Key Investor Information Document(s) for the fund(s) and share class(es) in which I am investing and if subscribing to an ISA, the latest ISA Terms and Conditions.

Signature

Date

Signature

Date

## INVESTMENT ADVICE AND ADVISER/AGENT DETAILS

Please use the tick boxes provided to indicate whether you have received advice from a financial adviser on this investment and provide their details.

I have received advice from the following adviser

Company name

Address

Postcode

I have not received advice from a financial adviser

## TO BE COMPLETED BY YOUR FINANCIAL ADVISER/AGENT

FCA code

Contact name

Telephone

Email

Discount (if applicable)

**For Execution Only Advice or other eligible entities post RDR**

Commission terms (if applicable)

**If commission is to be paid, please tick this box to confirm this investment is eligible**

Please remember to include an Identity Verification Certificate (IVC)

For help completing the form or for further information on any of our products, call us on

**0800 358 3010**

Monday to Friday 9am to 5pm.

We may monitor or record calls to improve our service.

You can email us at

**[investments@edentreeim.com](mailto:investments@edentreeim.com)**

Or visit us at

**[www.edentreeim.com](http://www.edentreeim.com)**

Support for financial advisers  
Dealing and administration:

**0800 358 3010**

Sales support:

**0800 011 3821**

Or visit us at

**[www.edentreeim.com/literature](http://www.edentreeim.com/literature)**

