

Application Form

Junior ISA



Once you have decided to apply for a Healthy Investment With profits stocks and shares Junior ISA please complete this application form and return it to us or your financial adviser.

If you have any questions about completing this form please telephone us on 0161 762 5790.

PLEASE USE BLOCK CAPITALS TO COMPLETE THE FORM

YOUR DETAILS

Only a parent or legal guardian can apply to open a Junior ISA unless the child is 16 or over when they can open one themselves. Once opened contributions can be made by anyone.

Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="text"/>	Address:
Forename(s):	
Surname:	
Date of birth:	Postcode:
Telephone number:	Email address:

THE CHILD OR YOUNG PERSON'S DETAILS

Forename(s):	Address (if different):
Surname:	
Date of birth:	Postcode:

If a national insurance number has been issued you must state the number. If not leave blank.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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THE INVESTMENT

Initial single investment £ Please enclose your cheque payable to Healthy Investment and/or

Monthly investment £ Please complete the Direct Debit mandate

DATA PROTECTION ACT 1998

The information you provide us with will be held by Healthy Investment.

It will be used for setting up and administering your policy. This may include use of credit reference agencies used to establish your identity in accordance with anti money laundering rules.

We may be required by law to disclose information regarding you or your policy to the regulatory authorities.

If you have arranged this policy through a financial adviser we will continue to share information with them to enable them to give you advice, until you tell us otherwise.

We will not share your information with other third parties for marketing purposes.

The Society may contact you in the future by adviser, post, email or telephone regarding your investment, financial and insurance needs. If you do not wish to receive this information then please tick this box.

INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY BY DIRECT DEBIT



Name and full postal address of your Bank or Building Society

To: The Manager	Bank/Building Society	Originators Identification Number: 6 7 6 4 8 1
Address		Reference Number (for office use only):
	Postcode	Please pay Healthy Investment Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Healthy Investment and if so, details will be passed electronically to my Bank/Building Society.
Name(s) of Account Holder(s):		SIGNATURE:
Branch Sort Code:		Date:
Bank/Building Society Account Number:		

JUNIOR ISA DECLARATION

I apply to open a stocks and share Junior ISA for the child named overleaf.

I declare that:

I am over 16 years of age.

I have parental responsibility for the child / I am the child (delete as appropriate).

I / the child does not have a Child Trust Fund account.

I will be the registered contact for the Junior ISA.

The child is resident and ordinarily resident in the UK, or is a UK Crown servant, a dependant of a UK Crown servant or is married to/in a civil partnership with a UK Crown servant.

I have not subscribed and will not subscribe to another stocks and shares Junior ISA.

I am not aware that this child has another stocks and shares Junior ISA.

I am not aware of other Junior ISA subscriptions that will result in this child exceeding the annual limit.

I will not knowingly make subscriptions to Junior ISAs for this child that will result in the subscription limit being exceeded.

I authorise The Rechabite Friendly Society Limited trading as Healthy Investment to hold the child's subscriptions, Junior ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and cash and to make on the child's behalf any claims to relief from tax in respect of Junior ISA investments.

I agree to the Junior ISA terms and conditions and confirm that to the best of my belief the information on this form is true.

HEALTHY INVESTMENT DECLARATION

Please read the following statements carefully and only sign the declaration if you agree with it. If you have any questions regarding them please contact us.

I have been provided with a copy of the Key Features Document and Terms and Conditions and understand the importance of reading these as they contain the terms and conditions of the contract I am entering into with Healthy Investment.

I have been provided with a personal illustration and 'A guide to how we manage our With profits Fund' which also gives important information on the investment.

I understand that this application and declaration and any additional information provided by me shall form the basis of the contract between myself and the Society and confirm that to the best of my knowledge all the information provided is accurate. I agree to advise Healthy Investment in writing of any changes to this information.

I understand that providing false information or failing to disclose a material fact may result in Healthy Investment cancelling this policy or may affect the benefits payable under this policy.

A PARENT'S SIGNATURE FOR CHILDREN UNDER 16

X

THE CHILD'S SIGNATURE FOR CHILDREN 16 AND OVER

X

DATE



Healthy Investment

2 The Old Court House, Tenterden Street, Bury, Greater Manchester BL9 0AL Telephone: 0161 762 5790 Fax: 0161 764 3557
email: enquiries@healthyinvestment.co.uk website: www.healthyinvestment.co.uk

Healthy Investment is the trading name of The Rechabite Friendly Society Limited, and is an incorporated Society within the meaning of the Friendly Societies Act 1992
Authorised and Regulated by the Financial Services Authority. FSA Register No. 109994

IFA SECTION - FOR FINANCIAL ADVISER USE ONLY

Name of adviser:	IFA firm:
Advised <input type="checkbox"/> Non advised sale <input type="checkbox"/>	

OCT11



This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.

If there are any changes to the amount, date or frequency of your Direct Debit Healthy Investment will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Healthy Investment to collect a payment, confirmation of the amount and date will be given to you at the time of the request.

If an error is made in the payment of your Direct Debit, by Healthy Investment or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.

If you receive a refund you are not entitled to, you must pay it back when Healthy Investment asks you to.

You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.