

SARASIN INVESTMENT FUNDS LIMITED
SARASIN FUND FOR CHARITIES - THEMATIC UK
EQUITY (GBP) APPLICATION FORM

SARASIN

Sarasin Fund for Charities - Thematic UK Equity (GBP) For UK registered charities only

Please return this form signed and completed (in BLOCK CAPITALS) to: **Sarasin Investment Funds Limited, PO Box 3733, Royal Wootton Bassett, Swindon, SN4 4BG.** Tel: 020 7038 7002, Fax: 020 7038 6851. Sarasin Investment Funds Ltd. is authorised and regulated by the Financial Conduct Authority. Where applications are by fax, a signed application form must also be sent by post.

APPLICATION FORM

I/We* hereby apply for shares in the Fund ("shares") at the price ruling on the Valuation Date relating to this application and for our name(s) (the name(s) of our nominee(s)) to be entered on the register upon and subject to the terms and conditions of the prospectus constituting the Fund (the "Prospectus").

	TYPE OF SHARE		AMOUNT	AMOUNT
	Accm	Dist.	Cash	Shares
Sarasin Fund for Charities - Thematic UK Equity (GBP)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

CHARITY PARTICULARS

Full name of charity¹: _____

Constitution of charity

Please tick the appropriate box below to indicate how the charity is set up:

- | | | | |
|--------------------------|--|--------------------------|---|
| <input type="checkbox"/> | By Trust Deed with individual Trustees | <input type="checkbox"/> | Limited Company |
| <input type="checkbox"/> | Unincorporated Association
(normally run by elected officers) | <input type="checkbox"/> | Other (eg Act of Parliament) - please specify:
_____ |

Charity registration number²

The charity is registered with the Charity Commission for England and Wales or the Scottish Charity register under charity number: _____

And/or is it recognised as a charity by HM Revenue & Customs (Charities) under reference number: _____

Registered address of charity: _____

Contact name: _____

Daytime telephone number: _____

¹ Please state the official name of the Charity, as recorded by The Charity Commission for England and Wales, the Office of the Scottish Charity Regulator (OSCR), HM Revenue & Customs or as detailed on the Charity Trust Deed or documentation establishing the charitable status of the organisation.

² Please confirm the status of the Charity, i.e. if the Charity is registered with The Charity Commission for England and Wales or the Office of the Scottish Charity Regulator or the Northern Ireland Charities Branch, Department for Social Development or if the Charity is registered with HM Revenue & Customs or if it is exempt or excepted from registration.

To confirm the charitable status of the organisation, please supply us with either the charity registration number issued by The Charity Commission for England and Wales or the Scottish Charity Number issued by The Office of the Scottish Charity Regulator or HM Revenue & Customs number issued by the Charity Title Section, HM Revenue & Customs (Charities), St John's House, Bootle, Merseyside.

REGISTRATION DETAILS

Please note that the holding will be registered in the name of the Charity as detailed in the Charity particulars section. However, if you would like to include a designation please state below:

Account designation (max. 11 characters): _____

The section below is only to be completed if the investment is to be registered in a third party nominee name. Please ensure the application form is signed by at least two authorised nominee company signatories.

Name of nominee company: _____

Correspondence address: _____

PAYMENT DETAILS

Please provide details of your payment method.

Please tick here if you are investing via a cheque made payable to "Sarasin Investment Funds Ltd."

Please tick here if you are sending subscription monies via bank transfer.

Please note all subscription monies should be paid to the following bank account:

Bank: Royal Bank of Scotland

Bank branch: London Corp Service Centre

Sort Code: 16-04-00

Account Number: 20018870

Account Name: Sarasin Investment Funds Ltd Sterling Client Money Account

Please quote the Charity Name as reference.

If you are sending subscription monies via bank transfer, please provide details of the bank account from which the monies will be transferred.

Bank/Building Society: _____ Branch Sort Code: _____

Bank/Building Society Account Number: _____

City: _____ Country: _____

Swift Code: _____ Account Number: _____

INCOME

If you wish to receive income from your investment, please complete this section.

(This section is applicable to the purchase of Distribution units only)

Bank/Building Society: _____ Branch Sort Code _____

Bank/Building Society Account Number: _____

Address: _____

Country: _____ Swift Code: _____

Account Name: _____

Building Society Roll Number: _____

Please note that if no payment details are provided, income will be reinvested to buy additional shares.

DECLARATION INDEMNITY AND SIGNATORIES

Indemnity declaration and signatories

Please also complete the names and addresses of all those signing on behalf of the Charity. An incorporated Charity should sign under seal if applicable. For additional signatories, please include details on a separate sheet of paper.

Please note that only Charities established under the laws of England and Wales and Charities based in Scotland and Northern Ireland are permitted to invest in these Funds.

I/we hereby warrant that:

1. The shares to which this application relates are and will at all times be held on behalf of the Charity:-
 - a) the income of which is applied for charitable purpose only
 - b) (i) the charity is registered with the Charity Commission for England and Wales and/or is registered with HM Revenue & Customs under the Charity and/or HM Revenue & Customs Number as stated within the Charity Particulars section of this application form; and/or (ii) the charity is registered with The Office of the Scottish Charity Regulator.
2. The Charity is eligible to invest in the Sarasin Fund for Charities - Thematic UK Equity (GBP) ('the Fund') under the prospectus. The Charity hereby indemnifies each of the Depositary and Manager of the Funds against any liabilities and/or costs arising out of the Charity ultimately being found to be ineligible.
3. The persons signing below are duly authorised to sign on behalf of the Charity; and
4. We will inform Sarasin Investment Funds Ltd. immediately should the Charity cease to qualify for 1) or 2) above, at which time disinvestment from the Funds will be required.

This warranty shall be deemed to be repeated in respect of each additional contribution to the Fund. We will also notify Sarasin Investment Funds Ltd. in writing of any new specimen signature and his/her capacity should be supplied.

- Please ensure the application form is signed by at least two authorised signatories that are authorised to sign on behalf of the Charity.
- Please print the above signatories FULL NAMES for our records.
- Please ensure the address of the signatories to which we may write is printed in full.
- The power of attorney or other authority (if any) under which this form is signed, or a copy of such power or authority certified in accordance with the Powers of Attorney Act 1971, must be enclosed with this form.

1. FIRST AUTHORISED SIGNATORY

Signature

Date

Capacity/role

Full name

Address

2. FIRST AUTHORISED SIGNATORY

Signature

Date

Capacity/role

Full name

Address

3. FIRST AUTHORISED SIGNATORY

Signature

Date

Capacity/role

Full name

Address

4. FIRST AUTHORISED SIGNATORY

Signature

Date

Capacity/role

Full name

Address

DATA PROTECTION

Information needed to carry out our agreement with you. Your personal details will be held by us in accordance with current data protection law for the purposes of carrying out our agreement with you. You hereby consent that this may include the transfer of such data (i) to other members of the Sarasin group and (ii) to other businesses (including their offices outside the European Union) where the transfer is necessary for the provision of services in relation to any of the Sarasin group's investment products or services.

If you wish to exercise your rights to receive a copy of the information that we hold about you please write to us at:
Sarasin Investment Funds Limited, PO Box 3733, Royal Wootton Bassett, Swindon, SN4 4BG.

VERIFICATION REQUIREMENTS

You are required to provide the following documentation attached to this application.

Charity identification

1. Please provide a copy of the Charities constitution document, if a Trust Deed, supply all supplementary Trusts Deeds; **AND**
2. Provide the Charity commission register details of:
 - The Charity registration number
 - Charity's objectives
 - Names of the trustees which must be signed by one of the instructing trustees
 - An authorised signature list
 - A copy of the latest reports and accounts
 - Personal documentation for the Company Secretary (if the charity is incorporated) or the instructing trustees (if the charity is unincorporated)
3. Provide a written confirmation of the signatories' authority to act on behalf of the Charity (if not already stated in the constitutional document provided)

