PRUDENTIAL TO MUTUAL FUND

## ICICI Prudential Child Care Fund (Gift Plan) An open ended fund for investment for children having lock-in for at

Application for Minor Resident Indians and NRI Investors. Investor must read Key Information Memorandum and Instructions before completing this form. All sections to be completed in ENGLISH in BLACK/BLUE COLOURED INK and in BLOCK LETTERS.

Application No.

ICICI Prudential Child Care Fund (Gift Plan) is suitable for investors who are seeking\* Long Term Wealth Creation Solution Investors understand that their • A diversified equity fund that aims to generate capital appreciation by investing in equity and equity related securities. principal will be moderately MO7 high risk. \*Investors should consult their financial advisers if in doubt about whether the product is suitable for them Low SUB-BROKER ARN CODE SUB-BROKER ARN-112623 E161330 ion No. (EUIN) (As allotted by ARN holder #By mentioning RIA code, I/we authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund. Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No. XIII). – I/We hereby confirm that the EUIN box has been intentionally left blank me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sale's person of the distributor and the distributor has not charged any advisory fees on this transaction. TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY [Refer Instruction XIII] In case the purchase/subscription amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, the same are deductible as applicable from the purchase/subscription amount and paid the distributor. Units will be issued against the balance amount invested.

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. 1. EXISTING BENEFICIARY CHILD INFORMATION If you have an existing folio no. with PAN & KYC validation, please mention your name & folio No. and proceed Name FOLIO No. 2. BENEFICIARY CHILD'S INFORMATION [Please Refer to Instruction No. II (b) & IV] NAME Mr. Ms. Date of Birth\*\* PAN/PEKRN\* KYC Id No.¥ NAME OF GUARDIAN (Name should be as per PAN) Mr. Ms. PAN/PEKRN\* | 🗌 KYC Proof Attached (Mandatory) | Relationship with Minor applicant: 🔾 Natural guardian 🔾 Court appointed guardian Date of Birth KYC Id No.<sup>4</sup> NAME OF DONOR (If different from Parent/Legal Guardian - Name should be as per PAN) Mr. Ms. M/s KYC Proof Attached (Mandatory) Date of Birth PAN/PEKRN\* KYC Id No.¥ If mandatory information left blank, the application is liable to be rejected. ¥ Individual client who has registered under Central KYC Records Registry (CKYCR) has to fill the 14 digit KYC Identification Number (KIN). 3. BANK ACCOUNT (PAY-OUT) DETAILS OF SOLE/FIRST APPLICANT (Please Refer to Instruction No. III) Mandatory information - If left blank the application is liable to be rejected. (Mandatory to attach proof, in case the pay-out bank account is different from the source bank account.) For unit holders opting to hold units in demat form, please ensure that the bank account linked with the demat account is mentioned here. Account Account Savings Current Number Type MANDATO Name of Bank **Branch City Branch Name** Enclosed (Please ): 9 Digit MICR code 11 Digit IFSC Code Bank Account Details Proof Provided 4. INVESTMENT DETAILS (Refer Instruction No. IV) (For Plans & Options, please see key features) Scheme: ICICI Prudential Child Care Fund (Gift Plan) | Plan & Option: 5. PAYMENT DETAILS (Refer Instruction No. III & VII) Mode of Payment O Cheque Funds Transfer ○ NEFT RTGS Investment **DD Charges** Total A + BAmount (if applicable) Amount Cheque / BANK Date DD Number **DETAILS**: ☐ Different from above [Please tick (✓) if it is different from above and fill in the details below] Account Account Type Savings Current Number Name of Bank **Branch Branch City** Name **Mandatory Enclosures** Cheque Copy Bank Statement Banker's Attestation (Please tick (✓) if the first instalment is not through cheque) Applications with Third Party Cheques, prefunded instruments etc. and in circumstances as detailed in AMFI Circular No.135/BP/16/10-11 shall be processed in accordance with the said circular. Please read the instruction no. VII(e). Third Party Payment Declaration form is available in www.icicipruamc.com or ICICI Prudential Mutual Fund branch offices.

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12. ASSIGNM	IENT FOR INSURANCE	[Please refer to the Personal Accide	ent Insurance Cover Instruction]			
declare that his/her receipt sha	ombard General Insurance Co. Ltd., in the	I Insurance Co. Ltd.	(assignee)*	(parent/legal guardian), do hereby assign the my I further		
	day of at					
	nt who has attained the age of majority.			Signature of Parent/Legal Guardian		
INVESTOR(S) DI	ECLARATION & SIGNATUR	E(S)				
units of the Fund and a Act, 2002 and such ot applicable to Plans/Opt the amount invested in laws enacted by the G plan, then ICICI Pruden we are not US Person(: Rs.50,000 in a year. Th Schemes of various M SMS, telecall, etc. If yoi Information/document	gree to abide by the terms, conditions ther regulations as may be applicable ions under the Scheme(s). I/we have the Scheme is through legitimate soup overnment of India or any Statutory attail Asset Management Co. Ltd.(the 'As). I/We hereby declare that I/we do ne ARN holder has disclosed to me/us utual Funds from amongst which the uton ond wish to receive, please call is given in/with this application form is	a, rules and regulations of the sche of from time to time. I/We confirm that received nor been induced by the roes only and is not designed for the Authority. I/We agree that in case is MC'), has full right to refund the exist of have any existing Micro SIPs was all the commissions (in the form a Scheme is being recommended on tallfree no. 1800 222 999 (MT) true and complete in all respects a	mation Document/Key Information Memorame and other statutory requirements of SE to have understood the investment object by any rebate or gifts, directly or indirectly, if the purpose of contravention or evasion of a my/our investment in the Scheme is equal screens to me/us to bring my/our investment which together with the current application on of trail commission or any other model, at the me/us. I/We interested in receiving profile. I/We I/We interested in receiving profile. I/We agree to provide any additional infately upon change in any information furnitation.	EI, AMFI, Prevention of Money Laundering tives, investment pattern, and risk factors in making this investment. I/We declare that any Act, Regulations or any other applicable to or more than 25% of the corpus of the below 25%. I/We hereby declare that I am will result in a total investments exceeding payable to him for the different competing promotional material from the AMC via mail communication.		
SIGNATURE OF SOLE	: / FIRST APPLICANT/GUARDIAN	SIGNATURE OF SECON	ND APPLICANT SIGN.	ATURE OF THIRD APPLICANT		
	<b>%</b>					
PRUDENTIAL 3	ACKNOWLEDGEMENT (Please Retain this Slip)	tion No.				
MUTUAL FUND	To be filled in by the Investor. Mandatory Information.	STING FOLIO NO.				
	ICICI Prudential Ch	ild Care Fund (Gift	Plan)			
Name of the Investor: _						
	Plan	Option/Sub-option	Payment Details	Receiver's Signature & Stamp		
			Amt Cheque/DD I dtd: Bank & Branch			
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## FOR ANY ASSISTANCE OR FURTHER INFORMATION PLEASE CONTACT US ICICI Prudential Asset Management Company Limited

Central Service Office, 2nd Floor, Block B-2, Nirlon Knowledge Park, Western Express Highway, Goregaon (East), Mumbai - 400 063. India **TOLL FREE NUMBER** 1800 222 999 (MTNL/BSNL) 1800 200 6666 (OTHERS) **EMAIL** enquiry@icicipruamc.com **WEBSITE** www.icicipruamc.com

Note: All future communications in connection with this application should be addressed to the nearest ICICI Prudential Mutual Fund Customer Service Centre, quoting full name of the first applicant, the application serial number, the name of the scheme, the amount invested, date and the place of the Customer Service Centre where application was lodged.