

# Regular Contribution Authority Forsyth Barr Investment Funds



If you have any questions regarding this form, please contact your Investment Adviser on 0800 367 227.

Account Name:

Account Number:

I wish to start regular contributions to my Forsyth Barr Investment Funds on:   
DAY MONTH YEAR

I wish to make regular contributions (as indicated below) via Direct Debit:

Frequency: Please tick one box only.

Frequency:  Weekly  Fortnightly  Monthly  4 weekly  Quarterly

| <b>Fund</b>   | <b>Regular contribution amount:</b> |
|---|-------------------------------------|
| <input type="radio"/> Forsyth Barr New Zealand Equities Fund:       | \$ <input type="text"/>             |
| <input type="radio"/> Forsyth Barr Australian Equities Fund:        | \$ <input type="text"/>             |
| <input type="radio"/> Forsyth Barr Listed Property Fund:            | \$ <input type="text"/>             |
| <input type="radio"/> Forsyth Barr Global Equities Fund:            | \$ <input type="text"/>             |
| <input type="radio"/> Forsyth Barr New Zealand Fixed Interest Fund: | \$ <input type="text"/>             |
| <input type="radio"/> Forsyth Barr Income Fund:                     | \$ <input type="text"/>             |
| <input type="radio"/> Forsyth Barr Balanced Fund:                   | \$ <input type="text"/>             |
| <input type="radio"/> Forsyth Barr Growth Fund:                     | \$ <input type="text"/>             |

I have also completed and attached the Forsyth Barr Investment Funds Direct Debit Form.

## Agreement and Signature

Name:

Signature:

Date:   
DAY MONTH YEAR

Name:

Signature:

Date:   
DAY MONTH YEAR

Name:

Signature:

Date:   
DAY MONTH YEAR