



RC956192

Joint Account Opening/Application Form For SFS Fixed Income Fund

DATE:

DETAILS OF APPLICANT

JOINT APPLICANT

JOINT ACCOUNT NAME																									
TITLE (MR,MRS, MS, CHIEF,...)																			GENDER (M/F):						
FIRST NAME																									
MIDDLE NAME																									
SURNAME																									
RESIDENTIAL ADDRESS																									
DATE OF BIRTH	<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"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
EMAIL ADDRESS																									
MOBILE PHONE																									
BVN																									
AMOUNT TO BE INVESTED (₦)																									
AMOUNT IN WORDS																									

OTHER APPLICANT (WHERE APPLICABLE)

TITLE (MASTER, MISS,...)																			GENDER (M/F):						
FIRST NAME																									
MIDDLE NAME																									
SURNAME																									
MOBILE NUMBER																									
RESIDENTIAL ADDRESS LINE																									
BVN																									
EMAIL ADDRESS																									
DATE OF BIRTH	<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"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

NEXT-OF-KIN

NAME																								
RESIDENTIAL ADDRESS LINE																								
MOBILE NUMBER																								
EMAIL ADDRESS																								
RELATIONSHIP																								

Documents required: A passport photograph and a valid I.D. Card

BANK	Stanbic IBTC PLC
ACCOUNT NAME	STL Trustees/SFS Fixed Income Fund
ACCOUNT NUMBER	0012958477

SIGNATURE OF UNIT HOLDER

DATE

SIGNATURE OF UNIT HOLDER

Individual Holders's Signature		Individual Holders's Signature
Name		Name

FOR FUND MANAGER USE ONLY

Account Officer	Signature	Date

Privacy Notice

At SFS Capital, we understand the importance of protecting an individual’s right to privacy. In the course of providing a service to you as an individual or corporate client, we may obtain personal information about you. Obtaining this information is important to our ability to deliver the highest level of service to you, but we are also committed to safeguarding the privacy of your information and upholding your privacy rights at all times.

For more information, please read up our data privacy policy on <https://www.sfsnigeria.com/privacy-policy/>.

By signing this form, you agree that you understand how your data will be used and consent to its use as stated in our privacy policy.

If you have any questions about SFS Capital’s privacy policy, the data we hold on you, or you would like to exercise one of your data protection rights, please do not hesitate to contact us at enquiries@sfsnigeria.com.

Signature and Date.....