

## APPLICATION FORM HDFC CHILDREN'S GIFT FUND Open-ended Balanced Scheme

Application No.

CG

Investors must read the Key Information Memorandum and the instructions before completing this form. The Application Form should be completed in English and in BLOCK LETTERS only.							
1. KEY PARTNER / AGENT INFORMATION FOR OFFICE USE ONLY							
Name and AMFI Reg. No. (ARN) Sub Agent's Name and Code / M O Code Date of Receipt Folio No. Branch Trans. No. ISC Name & Stamp							
ARN-97821							
Name  Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' as sessment of various factors including the service rendered by the ARN Holder.							
TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/AGENTS ONLY (Refer Instruction 2 and please tick (/) any one)							
☐ I confirm that I am a First time investor across Mutual Funds. ☐ I confirm that I am an existing investor in Mutual Funds.							
(Rs. 150 deductible as Transaction Charge and payable to the Distributor)  (Rs. 100 deductible as Transaction Charge and payable to the Distributor)							
In case the purchase / subscription amount is Rs. 10,000 or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the purchase/subscription amount and payable to the Distributor. Units will be issued against the balance amount invested.							
2a. APPLICANT INFORMATION (DONOR) (refer Instruction 3) Third Party Payment Declaration Form Attached (Mandatory) [Please (/)]							
Name of First/Sole Applicant Mr. / Ms. / M/s.							
Nationality KYC* (Mandatory) [Please (✓)] Proof Attached							
PAN* Mobile Mobile							
Address of First/Sole Applicant							
PIN							
Overseas Address (Mandatory in case of NRIs/PIOs) (P.O. Box Address may not be sufficient)							
e-mail							
Name of the Second Applicant (Mandatory) [Please (✓)]							
Nationality							
PAN*							
Name of the Third Applicant (Mandatory) [Please (√)] Resident NRI							
Mr. / Ms.							
Nationality							
PAN* KYC* (Mandatory) [Please (/)] Proof Attached							
* Please attach proof. Refer instruction No. 14 for PAN and No. 16 for KYC  2b. POWER OF ATTORNEY (PoA) HOLDER DETAILS							
Name of PoA   Mr.   Ms.   M/s.							
PAN*							
Status (of First/Sole Applicant) [Please (🗸)]  Occupation (of First/Sole Applicant) [Please (🗸)]							
Resident Individual ☐ Society / Club ☐ AOP ☐ PIO ☐ HUF ☐ LLP ☐ Service ☐ Student ☐ Professional ☐ Housewife ☐ NRI-Repatriation ☐ NRI-Non-Repatriation ☐ Company ☐ BOI ☐ Business ☐ Proprietorship ☐ Retired							
☐ Trust ☐ Partnership ☐ Body Corporate ☐ Others (please specify) ☐ Agriculture ☐ Others (please specify)							
3a. UNIT HOLDER (BENEFICIARY CHILD) INFORMATION (refer Instruction 4)							
Name of the Beneficiary Child Mast. / Miss.							
(Not exceeding 18 years of age)  Date of Birth							
Nationality         (Mandatory)         D         D         M         M         Y							
Address of the Beneficiary Child							
PIN							
Overseas Address (in case of NRIs/PIOs) (P.O. Box Address may not be sufficient)							
3b. PARENT / LEGAL GUARDIAN OF UNIT HOLDER (BENEFICIARY CHILD) (refer Instruction 4)							
Name of the Parent / Legal Mr. / Ms. guardian of Beneficiary Child							
Tel. : STD Code   Office   Residence							
PAN*   KYC* (Mandatory) [Please (/)] Proof Attached Alerts Mobile No.							
eDocs E-mail^							
^ On providing email-id investors shall receive scheme wise annual report or an abridged summary thereof / account statements / statutory and other documents by email.  Relationship with Minor@ [Please (/)]							
Posts of Birth of the county!							
Unit holder (Mandatory)  D D M M Y Y Y Y Signature of the Parent / Legal  Guardian of the Unit holder							
* Please attach proof. Refer instruction No. 14 for PAN and No. 16 for KYC @ Mandatory							
Mode of Holding Status (of the Beneficiary Child) (Mandatory) [Please (√)] Occupation (of the Beneficiary Child) [Please (√)]							
Single Resident NRI/PIO Others (please specify) Student Others (please specify)							
ACKNOWLEDGEMENT SLIP (To be filled in by the Investor) [For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 60006767 (Do not Prefix STD Code) or 18002336767 (Toll Free)]							
HDFC MUTUAL FUND ARN-97821 Application No.							
Head office : Ramon House, 3rd Floor, H.T. Parekh Marg, Date : 169, Backbay Reclamation, Churchgate, Mumbai 400020 CG							
Received from Mr/Ms/M/s an application							
for Gifting of Units along with Cheque/Demand Draft dated as per details below: ISC Stamp & Signature							
HDFC Children's Gift FundPlan. Units subject to Lock-in Period (Please ✓) ○ Yes ○ No.							

4. ALTERNATE CHILD INFO	RMATION	(refer Instru	uction 5)					
Name of the Alternate Child Mast. / Miss.								
(Not exceeding 18 years of age) Nationality	l				Date of Birth@	D D	M M Y Y Y Y Please (🗸)	
Name of the Parent / Legal Mr. / guardian of Alternate Child@	Ms.							
Relationship with Alternate Child®	[Please (🗸)]	Father Mot	ther Court appointed Legal Gu	ardian	Pr	oof of relation	onship attached@ Please (/) @ Mandatory	
Address of the Alternate Child								
PIN PIN								
Overseas Address (in case of NRIs/PIOs) (P.O. Box Address may not be sufficient)								
Status (of the Alternate Child) [Mandatory (Please ✓)] Occupation (of the Alternate Child) [Mandatory (Please ✓)]								
☐ Resident ☐ NRI/PIO ☐ Others(please specify) ☐ Student ☐ Others(please specify)								
5. BANK ACCOUNT DETAILS OF UNIT HOLDER (BENEFICIARY CHILD)(Please note that, as per SEI Regulations it is mandatory for unit holders to provide their bank account details - refer Instruction 6A)								
Account No. Name of the Bank								
Branch	Bank City							
	Savings Current NRE NRO FCNR Others (please specify) IFSCCode*** (Refer Instruction 6C)							
MICR Code** (The 9 digit code appears on your cheque next to the cheque number)  *** (Mandatory for Credit NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank)								
6. MODE OF PAYMENT OF REDEMPTION / DIVIDEND PROCEEDS [Please (√)] (Refer Instruction 11)								
Unitholders will receive redemption/dividend proceeds directly into their bank account (as furnished in Section 5) via Direct credit/NEFT/ECS facility								
I/We want to receive the redemption / dividend proceeds (if any) by way of a cheque / demand draft instead of direct credit / credit through NEFT system / credit through ECS into my / our bank account								
7.  eSERVICES OPTIONS (SAVE PAPER, SAVE TREES) [Please (✓)] (Refer Instruction 12)								
HDFCMF@uline & HDFCMF@olicle - I / We would like register for my/our HDFCMF Personal Identification Number (HPIN) to transact online.								
Mandatory information to be provided:								
a) Email address of the guardian:								
(if the address given herein is different from the email address under section 3(b), the email address under section 7(a) will be considered during registration for HPIN).  b) Maiden Name of the Mother of the Unit holder (Beneficiary Child)								
-			•	erms & Cond	litions availal	ble in the Sen	vices booklet as well as on our website)	
1 / We have read and understood the terms and conditions and confirm // we shall bound by them (Terms & Conditions available in the Services booklet as well as on our website)  8. INVESTMENT DETAILS (refer Instructions 7 & 8) (Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.)								
8. INVESTMENT DETAILS (re								
			be drawn favouring "HDFC ( Ind-(Plan Name) (Unitholder					
	Cheque/DD No. Chec					Drawn on		
	DD D			ate		Bank		
FIDEC	Amount of Cheque / DD / RTGS in figures (Rs.)			Branch Name				
CHILDREN'S GIFT FUND	Amount in words (Rs.)							
Open-ended Balanced Scheme	Investment Plans   Investment Plan (Equity Oriented)   Savings Plan (Debt Oriented)						Plan (Doht Oriented)	
	(Please ✓) Savings Plan (Debt Oriented)						Tian (Sept Stiernes)	
		Please 🗸]	○ Yes			○ No		
O DECLADATIONS & SIGNA	TUDE/C)	(D. f )	421				CICN HERE 45	
9. DECLARATIONS & SIGNA				SIGN HERE O				
I / We have read and understood the terms allotment of Units of HDFC Children's Gift Fi and regulations of the Scheme. I/We hereby	and contents of und (the Schem	e). I /We agree to a	ed documents and hereby apply for sbide by the terms, conditions, rules			Folio No	Please write Application Form No. / o. on the reverse of the Cheque / Demand Draft.	
<ol> <li>I/We am/are authorised to make this inv the amount invested in the Scheme is designed for the purpose of any contra</li> </ol>	through legiting	mate sources only sion of any Act. R	and does not involve and is not	First / Sole	e Applican	t		
Directions issued by any regulatory author	ority in India							
The information given in / with this ap furnish such other information as may b Registrars and Transfer Agent (RTA) in time. Whe hereby indemnity HDFC Mut any dispute regarding the eligibility, va	e required by HI	DFC Mutual Fund	and undertake to inform the AMC /					
time. I/We hereby indemnify HDFC Mut	willing about a ual Fund and it	rny change in the i 's AMC, Trustee, R	TA, other intermediaries in case of	d A				
who applied off fifty four behalf.				Second A	pplicant			
<ol> <li>I/we have not received nor been induced The ARN holder (AMFI regis</li> </ol>	by any rebate o tered Distri	r gifts, directly or in i <b>butor) has d</b> i	ndirectly, in making this investment.  isclosed to me/us all the					
commissions (in the form of him/them for the different of	trail commompeting S	ission or any chemes of va	other mode), payable to rious Mutual Funds from					
3. I/we have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment.  The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.								
*I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-					Third Applicant			
*Applicable to NRIs only Date : D D M M Y Y Y Y								
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