



Aditya Birla Sun Life Bal Bhavishya Yojna

(An open ended fund for investment for children having a lock-in for at least 5 years or till the child attains age of majority (whichever is earlier))

This Product is suitable for investors who are seeking*:	Scheme Riskometer	Benchmark Riskometer Nifty 500 TRI
<ul style="list-style-type: none"> Long term capital growth investment in predominantly equity and equity related securities as well as debt and money market instruments 	<p>Investors understand that their principal will be at Very High risk.</p>	<p>Investors understand that their principal will be at Very High risk.</p>

*Investors should consult their financial advisers if in doubt whether the product is suitable for them

(Please read the instructions before filling up the form. All sections to be completed in english in black / blue coloured ink and in block letters.)

Distributor Name & ARN/ RIA No. JAVAHAR K.P. ARN 10021	Sub Broker Name & ARN/ RIA No.	Sub Broker Code	Employee Unique ID. No. (EUN) EUN No. E035876	Application No.
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Distributor Mobile No. **Distributor Email Id**

Applicable only for Regular Schemes. Please note the Distributor Mobile & Email Id will not be updated in the Broker Master and will be restricted to this transaction only.

EUN is mandatory for Advisory transactions. Ref. Instruction No. 9

I/we hereby confirm that the EUN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

First Applicant / Authorised Signatory	Second Applicant	Third Applicant
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Transaction Charges for Applications routed through Distributors/agents only (Refer Instruction 1 (viii))

In case the subscription (lumpsum) amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

Existing Unitholder please fill in your Folio No., Name & Email ID and then proceed to Section 5 (Applicable details and Mode of holding will be as per the existing Folio No.)

Existing Folio No.

1. BENEFICIARY CHILD INFORMATION (MANDATORY) (Refer Instruction No. 2,3,4) Fresh / New Investors fill in all the blocks. (1 to 8) In case of investment "On behalf of Minor", Please Refer Instruction no. 2(ii)

Name of First/Sole Applicant (as per PAN Card)#

Mr.	Ms.	M/s.																											
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PAN / PEKRN (Mandatory)

										Date of Birth	D	D	M	M	Y	Y	Y	Y
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CKYC Number

(Prefix if any)	14 digit CKYC Number												
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Name of the Guardian (as per PAN Card)# / Contact Person - Designation - Poa Holder (In case of Non-individual Investors)

Mr.	Ms.	M/s.																											
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PAN / PEKRN (Mandatory)

										Date of Birth	D	D	M	M	Y	Y	Y	Y
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CKYC Number

(Prefix if any)	14 digit CKYC Number												
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Relationship of Guardian (Refer Instruction No. 2(ii))

ISD CODE

TEL: OFF. S T D -

TEL: RESI S T D -

#The application is liable to get rejected if does not match with PAN card

Proof of the Relationship with Minor

Acknowledgement Slip (To be filled in by the Investor)

Aditya Birla Sun Life Bal Bhavishya Yojna

Application No.

Collection Centre /
ABSLAMC Stamp & Signature

Received from Mr. / Ms. _____ Date : ____/____/____

[Please Tick (✓)] Enclosed PAN/PEKRN Proof KYC Complied



KYC DETAILS (Mandatory)

OCCUPATION [Please tick (✓)]

GUARDIAN DETAILS	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife
	<input type="checkbox"/> Student	<input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Others (please specify)					

GROSS ANNUAL INCOME [Please tick (✓)]

GUARDIAN DETAILS	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> > 25 Lacs - 1 Crore	<input type="checkbox"/> > 1 Crore								
	Net worth (Mandatory for Non - Individuals) Rs. _____ as on					<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y							

For Individuals			
	I am Politically Exposed Person	I am Related to Politically Exposed Person	Not Applicable
GUARDIAN DETAILS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. DEMAT ACCOUNT DETAILS (OPTIONAL) (If Demat details are provided, units will be compulsorily given in Demat form only) (Please ensure that the sequence of names as mentioned in the application form matches with that of the A/c. held with the depository participant.) Refer Instruction No. 3(B)

NSDL: Depository Participant Name: _____ DPID No.:

I	N								
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 Beneficiary A/c No.

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CDSL: Depository Participant Name: _____ Beneficiary A/c No.

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Enclosed: Client Master Transaction/ Statement Copy/ DIS Copy

6. FATCA & CRS INFORMATION [Please tick (✓)] For Individual Investors including Sole Proprietor (Non Individual Investors should mandatorily fill separate FATCA detail form)

The below information is required for all applicant(s)/ guardian
 Address Type: Residential or Business Residential Business Registered Office (for address mentioned in form/existing address appearing in Folio)
 Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? Yes No
 If Yes, please provide the following information [mandatory]
 Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

Category	Minor's Details	Guardian Details
Name of Applicant		
Place/ City of Birth		
Country of Birth		
Country of Tax Residency#		
Tax Payer Ref. ID No^		
Identification Type [TIN or other, please specify]		
Country of Tax Residency 2		
Tax Payer Ref. ID No. 2		
Identification Type [TIN or other, please specify]		
Country of Tax Residency 3		
Tax Payer Ref. ID No. 3		
Identification Type [TIN or other, please specify]		

#To also include USA, where the individual is a citizen/green card holder of USA. ^In case Tax Identification Number is not available, kindly provide its functional equivalent.



7. DECLARATION(S) & SIGNATURE(S) (Refer Instruction No. 1)

To,

Date	D	D	M	M	Y	Y	Y	Y
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The Trustee,

Aditya Birla Sun Life Trustee Private Limited.

Having read and understood the contents of the Statement of Additional Information / Scheme Information Document of the Scheme, I/We hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment.

For NRIs only: I/We confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External/Non-Resident Ordinary/FCNR account. (Refer Inst. No. 6)

I/We confirm that details provided by me/us are true and correct.**

** I have voluntarily subscribed to the on-line access for transacting through the internet facility provided by Aditya Birla Sun Life AMC Limited (Investment Manager of Aditya Birla Sun Life Mutual Fund) and confirm of having read, understood and agree to abide the terms and conditions for availing of the internet facility more particularly mentioned on the website www.adityabirlasunlifemf.com and hereby undertake to be bound by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for all the costs and consequences thereof.

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

"I / We acknowledge that the RIA has entered into an agreement with the AMC / MF for accepting transaction feeds under the code. I / We hereby indemnify, defend and hold harmless the AMC / MF against any regulatory action, damage or liability that they may suffer, incur or become subject to in connection therewith or arising from sharing, disclosing and transferring of the aforesaid information."

FATCA & CRS Declaration: I/ We have understood the information requirements of this Form (read along with FATCA & CRS Instructions) and hereby confirm that the information provided by me/ us on this Form is true, correct, and complete. I/ We also confirm that I/ We have read and understood the FATCA & CRS Terms and Conditions and hereby accept the same. (Refer Inst. No. 13)

Signature of Guardian / Authorised Signatory