

SIP REGISTRATION FORM

For first time investors, submit common application form along with this form.

DISTRIBUTOR INFORMATION				
Name & ARN of Distributor / RIA Code ⁹	Internal Sub-Broker Code (as allotted by Distributor)	Sub-Broker ARN Code No.	Employee Unique Identification No. (EUIIN) [^]	Serial No., Date & Time Stamp
24952			E E347831	

[^]**Mandatory:** Furnishing of EUIIN is mandatory for SIP transactions or following declaration should be signed by the investor (Please ✓ the box).

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor.

I/We, have invested in the scheme(s) of JM Financial Mutual Fund under Direct Plan. I/We hereby give my/our consent to share/provide the transactions data feed/ portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all schemes of JM Financial Mutual Fund, to the above mentioned SEBI Registered Investment Adviser:

Declaration: "I/We hereby confirm that the EUIIN 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."

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EXISTING UNIT HOLDER'S INFORMATION (Please fill in your details mentioned below)		TRANSACTION CHARGES (Applicable for transactions routed through a distributor who has 'opted in' for transaction charges.)	
Folio No.		<input type="checkbox"/> I/We am/are a First Time Investor in Mutual Fund Industry. (Rs 150 will be deducted.)	
		<input type="checkbox"/> I/We am/are an Existing Investor in Mutual Fund Industry. (Rs 100 will be deducted.)	

In case the 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.

1. APPLICANT'S DETAILS (It is mandatory to submit verified copy of PAN proof for all investments failing which application will be rejected)

Name (Capital Letters) _____ DOB _____
(Mandatory in case of minor)

Name of Guardian (if first applicant is a minor / Contact Person for non individuals) _____

Guardian's Relationship With Minor Father Mother Court Appointed Guardian **Proof of Date of Birth** Birth Certificate Passport Others _____ (Please specify)

1st Applicant PAN _____ 2nd Applicant PAN _____

3rd Applicant PAN _____

2. SIP First Installment Details (Optional)

Scheme	Plan	Option	Amount
Total (in words):			in figures

Drawn on bank / branch name _____ Cheque / DD amount _____

Mode Cheque / DD _____ Dated _____

3. SIP Details

OTM ref no. _____

Regular SIP: First Installment of Regular SIP through a Cheque/Electronic transfer and subsequent investments via National Automated Clearing House (NACH).

Micro SIP: First Installment of Regular SIP through a Cheque and subsequent investments via National Automated Clearing House (NACH).

I/We hereby apply for the following facility under Systematic Investment Facilities (Pl tick only one from each column)

Facility (Please ✓)	Name of the Scheme /s (Please Mention)	Plan (Please ✓)	Option (Pls mention)	Sub-Option (Please ✓ in case of IDCW)
<input type="checkbox"/> SIP	JM	<input type="radio"/> Direct <input type="radio"/> Regular		<input type="radio"/> Payout <input type="radio"/> Reinvestment

Please select and tick any of the due dates from the below table against the facility being chosen by you.

Facility (Please ✓)	Weekly (Please ✓)	Fortnightly (Please ✓)	Monthly** (Please ✓)	Quarterly (Please ✓)
<input type="checkbox"/> SIP	<input type="radio"/> 1st <input type="radio"/> 8th <input type="radio"/> 15th <input type="radio"/> 22nd of the month	<input type="radio"/> 1st <input type="radio"/> 15th of the month	<input type="radio"/> 1st <input type="radio"/> 5th <input type="radio"/> 10th <input type="radio"/> 15th <input type="radio"/> 20th <input type="radio"/> 25th of the month	<input type="radio"/> 1st of next month & every quarter thereafter

Installment Amount	Rs.	Enrolement Period	From	To	<input type="radio"/> or Perpetual (i.e until it is cancelled)
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** First of the month will be the default frequency if not ticked.

4. Declaration

Applicable for SIP Investors only: I/We hereby declare that the particulars given above are correct and express my/our willingness to make payments referred above through participation in NACH /Direct Debit or Standing Instruction Clearance. In case the transaction is delayed or not effected at all, for reasons of incomplete or incorrect information on my/our part or circumstances beyond the control of the AMC/its service provider, I/we would not hold the Asset Management Company or its associates/vendors responsible in any manner. I/We hereby authorize JM Financial Mutual Fund and their authorised service providers, to get my/our above bank account debited by NACH /Direct Debit/Standing Instructions towards the collection of payments on due SIP dates as opted by me/us. In the event of any changes in the bank particulars, I/we will submit a fresh mandate along with a cancellation request for the earlier mandate well in advance. I/We understand and agree to the current terms & conditions for SIP Pause facility in case I/We opt for the same anytime. I/We have read and agreed to the terms and conditions mentioned in KIM / Scheme Information Document of the scheme.

Consent for sharing Information :- I/We hereby consent to the disclosure/sharing of my/our personal information to the Judicial /Statutory/ Regulatory Authorities for the compliance of legal obligation of JM Financial AMC/JM Financial Mutual Fund/JM Financial Trustee Co. Pvt. Ltd. I/We also consent to the sharing of the transaction feed of my/our Investment in the above Scheme of JM Financial Mutual Fund with the Registered Investment Advisor (RIA)/Distributor whose RIA/ARN Code is mentioned above.

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