

## Acting on Behalf of a Minor

### Linked Investments

#### IMPORTANT INFORMATION

Please complete this form if you are the parent or legal guardian of the minor and will manage the investment account on behalf of the minor. This form is not required if you have provided us with a birth certificate or proof of guardianship reflecting your details. Please note that only parents and / or guardians will be granted control of a minor's account. You may grant additional parties power over the account via way of a power of attorney to this effect.

Please email the completed form to [Lispinstructions@stanlib.com](mailto:Lispinstructions@stanlib.com), or fax to 0867 277 516 along with the documentation on our FICA and Business Requirement Annexure

#### DECLARATION BY THE PARENT OR LEGAL GUARDIAN

I declare that I am permitted to manage the investment account on behalf of the minor.

#### DETAILS OF MINOR

FIRST NAME*	<input type="text"/>	SURNAME*	<input type="text"/>
ID NUMBER/PASSPORT NUMBER*	<input type="text"/>	THE MINOR IS REGISTERED FOR TAX*	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, PLEASE PROVIDE THEIR TAX NUMBER*	<input type="text"/>		

\* Compulsory fields

#### DETAILS OF GUARDIAN

ACTING AS *	<input type="checkbox"/> PARENT	<input type="checkbox"/> LEGAL GUARDIAN	
FULL NAME*	<input type="text"/>	SURNAME*	<input type="text"/>
ID NUMBER/ PASSPORT NUMBER*	<input type="text"/>	TELEPHONE (H)	<input type="text"/>
TELEPHONE (W)	<input type="text"/>	CELLPHONE*	<input type="text"/>
EMAIL ADDRESS*	<input type="text"/>		

\* Compulsory fields

#### DECLARATION

PoPIA (Protection of Personal Information Act, 2013) is South Africa's data protection law that aims to protect your personal information. Our latest Platform terms and conditions, available on [www.STANLIB.com](http://www.STANLIB.com) explain how and why we obtain, use, process, store, verify and share your personal information.

I/We confirm that I/We have read and accept the clauses in the Terms and Conditions relating to the collection, processing, storage and distribution of my/our personal information.

I/We acknowledge that acceptance of these terms and conditions is voluntary, but that without my/our personal information as required by this application form STANLIB will be unable to provide me/us with products or services.

SIGNATURE OF PARENT/LEGAL GUARDIAN	<input type="text"/>	DATE	<input type="text"/> - <input type="text"/> - <input type="text"/>
		SIGNED AT	<input type="text"/>

