

Can we help you?

If you or your financial adviser needs help completing the form, please contact us, telephone calls may be recorded.

T: 0800 208 4483

E: admin@uk.causeway-securities.com

Please send completed applications including the required supporting documentation to:

E: admin@uk.causeway-securities.com

Causeway Securities Limited PO Box 1378, St Albans, AL1 9SX

Please note that we cannot accept your application unless you have either received financial advice or had the appropriateness of this investment assessed by an FCA regulated financial adviser.

THREE STOCK DEFENSIVE 90% KICK-OUT PLAN

OCTOBER 2025

APPLICATION FORM Direct, New ISA and ISA Transfer

Key Dates:

ISA Transfer Deadline: 3 October 2025 Application Deadline: 17 October 2025

Start Date: 24 October 2025

ISIN: XS2808799758



1. PERSONAL DETAILS	(Please complete ALL fields):		
First Plan Holder		Second Plan Holder	
Title (Mr/Mrs/Miss/Ms/Other):		Title (Mr/Mrs/Miss/Ms/Other):	
Forename(s):		Forename(s):	
Surname:		Surname:	
NI Number:		NI Number:	
Permanent Address:		Permanent Address:	
Post Code:		Post Code:	
Date of Birth:		Date of Birth:	
Telephone No.:		Telephone No.:	
Email Address*:		Email Address*:	
Country of Birth:		Country of Birth:	
Place of Birth:		Place of Birth:	
Nationality:		Nationality:	
Are you resident in the UK for Tax	Purposes? Yes No	Are you resident in the UK for Tax	Purposes? Yes No
Are you resident for tax purposes in	another country? Yes No	Are you resident for tax purposes in	another country? Yes No
If you answered 'yes' to the latter	question, input Country and Tax Ref.:	If you answered 'yes' to the latter	question, input Country and tax Ref:
	/		/
*A valid email address is compul-	sory, as it will be needed to access all you	ir correspondence relating to the plan.	
Title (Mr/Mrs/Miss/Ms/Other): Date of Birth:	ILD (Applicable for DIRECT inv	Forename(s): Surname:	
3. GIFT FROM ANOTHER Title (Mr/Mrs/Miss/Ms/Other): Date of Birth:	R - Where the funds have been	gifted to the applicant (not a property of the second of t	applicable for ISA transfers):
Relationship to Plan Holder:			
Signature:		Date:	
4. SOURCE OF FUNDS -	What has created / is generati	ing the funds being used to a	ppen this plan?
Accumulated Sav Property		on Lump Sum Employment relain Reinvestment of I	
Transfer from another prov		(please state)	naturea ranas
	ts and income payments will be transmitte or building society within the UK Clearing S		ty account. Payments can only be
Rank / Ruilding Society Name:			
Bank / Building Society Name:			
Account Holder Name:		1	
Sort Code		Account Number:	
		Building Society Ref. / Roll Number:	



6. INVESTMENT DETAILS, AMOUNTS (must be in whole pounds) AND FEE ARRANGEMENTS

Plan Name:		
Direct Amount:		_
ISA Amount (max £20,000):		_
ISA Transfer Amount* (complete appendix):		_
Maturity Reinvestment Amount**:		_
		_
Total to be invested (min. £3,000):		
Pay this amount to my Financial Adviser:	OR %	
OR Fees settled directly with my Financial Advis	r:	
TOTAL AMOUNT TO BE PAID TO CAUSEWAY SE (this must be the sum of the Totals to be invest fee to be paid to your Financial Adviser (where	d + the amount of	_
*Approximate value of all ISAs being transferred	Total amount is subject to change as the ISA transfer amount is approximate.	
**If you have been notified of the maturity of a	existing Causeway Plan and would like to reinvest the proceeds into this plan, please enter the amount yo	эu
wish to reinvest. Please advise of your matured	auseway Plan Number here:	_
*Investment amount must be in whol Please submit the above investment a Bank Name:	e pounds. nount by bank transfer to the details below: Natwest	٦
Account Name:	Causeway Securities Limited	┨
Sort Code:	60-00-01	1
Account Number:	49228609	1
IBAN:	GB89NWBK60000149228609	1
Payment Reference (MANDATORY):	Please use your Legal Entity Identifier (LEI)/Tax Identification Number	1
If paying by cheque, please make payable to Cathe offer close date).	seway Securities Limited (please note cheque applications should be received 5 working days before	-
7. DATA PROTECTION-Use of you	⁻ data	
to provide you with services you request from to ensure that we comply with legal and regula	ocessing your data in accordance with the Data Protection Act 2018. We may use your personal data s, manage your accounts, make decisions, detect and prevent fraud, for analysis and assessment, and ory requirements. For further details of how Causeway Securities Limited use your information, please site www.causeway-securities.com or ask for a printed copy.	
I / We do not wish to receive marketing materi	by post and telephone	
By signing this form you agree that we can use a updated from time to time.	nd disclose your information in the ways described in our Data Protection Statement, as amended or	



8. DECLARATION

Applicable to direct investment applicants only

I declare that: as set out in the Personal Details section, I am 18 years of age or over, and either: (a) resident in the UK for tax purposes and that I am not acting on behalf of a Non-UK tax resident; or (b) resident of the Isle of Man, Guernsey or Jersey.

Applicable to all ISA applicants* / ISA Transfer applicants

I apply to subscribe for an ISA for the 2025/26 tax year, reinvest my cash ISA or stocks and shares ISA proceeds, or to transfer an existing ISA from another ISA manager.

* For deposit-backed plans, you are investing in a Cash ISA. For all other plans, you are investing in a Stocks and Shares ISA.

I declare that:

- All subscriptions made, and to be made, belong to me.
- I am 18 years of age or over.
- I have not subscribed, and will not subscribe, more than the overall subscription limit in total to a cash ISA, stocks and shares ISA, an innovative finance ISA and a Lifetime ISA in the same tax year.
- I am resident in the United Kingdom for tax purposes or, if not UK tax resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving oversees), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform Causeway Securites Limited if I cease to be so resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.
- I have read and understood the ISA Terms and Conditions.

For all applicants

I declare that:

- I am neither in the United States nor a U.S. Person (as defined in Regulation S under the U.S. Securities Act of 1933, as amended, or as defined in the U.S. Internal Revenue Code of 1986, as amended).
- I have read and understood the Key Information Document and Plan brochure(s), including Plan risks and selling restrictions, and the Terms and Conditions under which the Plan(s) will be managed.

I authorise Causeway Securities Limited:

- To hold my cash subscription, ISA investments, direct investments, interest and any other rights or proceeds in respect of those investments and any other cash and to make on my behalf any claims to relief from tax in respect of ISA investments.
- Upon my written request to transfer or pay to me any amounts, as determined in accordance with the Terms and Conditions of my Plan(s),
 realised on or deriving from, as the case may be, ISA investments and/or direct investments including all rights and proceeds in respect of such
 ISA investments or direct investments.
- To supply me with a periodic statement.

I/We agree to comply at all times with any request from Causeway Securities Limited to provide additional information and or documentation related to my/our tax status within the timescale specified by Causeway Securities Limited in its request.

You agree that your monies will be used to purchase securities issued by the relevant Issuer, as specified in the Plan brochure.

You acknowledge that the Plan Manager will only provide an annual statement on the value of your Plan(s).

Once you have read the above, please sign in Section 10 (below).

9. YOUR SIGNATURE (Please copy sheet for additional Signatories)

First Plan Holder:	_	
Signature:	Full Name:	
	Date:	
Second Plan Holder:		
Signature:	Full Name:	
	Date:	



10. ADVISER SECTION

Name of Registered Individual:			
Name of Company:			
Address:			
			Post Code:
Telephone Number:			
Email Address*:			* This email address will be used to access our
Are you a member of a network?	Yes	No	administration system, therefore we recommend
If Yes, are you:	Discoult of the discoult		using an email address that all relevant members
Name of network:	All author	rised representative:	of your team have access to, if appropriate.
Financial Services Register Ref:			
Principal's Financial Services Regi	ster Reference (if applicable):		
Diago tick ONE of the following	to confirm		
Please tick ONE of the following			
This was an advised sale	This was a non-advised sale v	with appropriateness	
 I declare that the informatio charge with the applicant. 	n stated in the application has been co	ompleted to the best of my kno	owledge and belief and I have agreed any adviser
I have provided the investor	with a Plan Brochure and Key Informat	tion Document.	
_	ith the investor have been carried out i vay SecuritiesLimited'scurrentTerms of B	· · · · · · · · · · · · · · · · · · ·	ments of the FCA Handbook and in accordance with
documentation, I have asse	ssed the suitability of this product with	h respect to the customer's in	t(s) in accordance with the guidance set out in the Plan vestment objectives and circumstances. Where er's investment objectives and circumstances.
experience to be deemed cor	· · · · · · · · · · · · · · · · · · ·	lity to an applicant's circumstan	nave given advice, I have the necessary knowledge and ces and investment objectives, and that the applicant
= :	ion needs (e.g. documents to be provide		specific vulnerabilities you think we need to be aware eway Securities bycalling 0800 208 4483 or emailing
Tick to confirm declaration above			
Verification of Identity			
confirm that:			
The information was obtained.	ed by me in relation to the customer(s);		
	d to verifythe identity of the customer(s ne Joint Money Laundering Steering Gr		set out within the guidance Notes for the UK
	ate identity checks on all parties relev porting documentation, which lunders		e retained copies of the completed Verification of requestatany time and may relyon.
Tick to confirm declaration above			
Authorised Signatory:		F	ull Name:
5. ₀ .,ατοι γ.			Job Title:
			JOB TRIC.



APPENDIX: ISA TRANSFER INSTRUCTIONS

Please complete this page if you are transferring an existing ISA into the Plan. If you are transferring ISAs from more than one ISA Manager, please photocopy this page and complete for each ISA Manager.

If your intended transfer includes the transfer of current year ISA subscriptions, you must transfer the full amount for the current year.

Do not send this page to your existing ISA Manager. Instead, please ensure it is included with the rest of your completed application form, and we will arrange the transfers with your existing ISA Manager.

Your Details		Your Existing ISA Manager	
Title (Mr/Mrs/Miss/Ms/Other):		Company Name:	
Forename(s):		Address:	
Surname:			
NI Number:			
Permanent Address:		Postcode:	
		Contact Name:	
		Contact Email:	
Post Code:			
Date of Birth:			
Email Address:			
ISA Account References:		Approx. transfer amount (if tran	nsferring in full, write 'FULL')
and Shares ISA account(s), in ca	sh. Please encash / sell all investments	Causeway Securities Limited in relation to and transfer my entire ISA portfolio valuorts or any other information as deemed n	e to Causeway Securities Limited.
I understand that any fees in rel	ation to this transfer are to be taken fro	m my account with the existing ISA Manag	ger.
	ities Limited will be unable to accept the	or any future dividends or tax reclaims, tog hese additional amounts if they are not in	
This form constitutes my reques	t to Causeway Securities limited to acce	ept the transfer of my ISA and to act as my	ISA manager.
Signature:		Full Name:	
		Date:	
		-	

Note to current ISA manager: Causeway Securities is able to receive ISA transfers even if the transfer amount entered on this instruction does not match the records held by you.



Application checklist:

0	Make sure you send the completed form back to Causeway Securities Limited, PO Box 1378, St Albans AL1 9SX, before the investment deadline detailed in the Plan Brochure, preferably by registered post to make sure it arrives.
0	Make sure you have Terms of Business in place with us.
What har	ppens next:
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0	Completed application forms will be processed by our Administration Team within 24 hours of receipt.
0	The investor will receive an email with our bank details requesting payment. This will include the reference to use when making the electronic payment so that we can match it to the application. Please check spam and junk email folders to make sure this email is not missed.
0	Once the payment has cleared, it will be allocated to the client's account within 24 hours.
0	Once allocated, investors will receive an email from Admin@uk.causeway-securities.com containing log in details to our online investment portal (it is therefore very important that an up-to-date email address is provided on the completed application form).
0	If this is the first time that the financial adviser has submitted a paper application, they will also receive an email with log in details.
0	Both the investor and the adviser should follow the instructions to log in to the online portal, where all further communications will be securely shared. No communications will be sent via post (with the exception of the Adviser Fee Statement).

If you have any questions about the application process, please contact our Administration Team by 0800 208 4483 or emailing admin@uk.causeway-securities.com

O Check you (the adviser) and the investor have completed all relevant sections and provided signatures.

PLEASE SEND COMPLETED APPLICATIONS INCLUDING THE REQUIRED SUPPORTING DOCUMENTATION TO:

Causeway Securities Limited

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E: admin@uk.causeway-securities.com

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