

NZS Global Growth Trust

Class B

Application Booklet

ARSN: 691 841 335 APIR: CHN3393AU

Issued by Channel Investment Management Limited ACN: 163 234 240 AFSL No: 439 007

Now Accepting Online Applications

We encourage the use of our online application platform which can be accessed via the link below:

https://www.channelcapital.com.au/invest

The online platform for direct investing significantly streamlines the application process by reducing the use of paper, increasing efficiency and offers a smoother experience for both direct investors and advisers. With automated onboarding functionality and instant AML/KYC*, applications can be completed quickly and securely.

Please contact Channel's Client Services if you require assistance on 1800 940 599 or email clientservices@channelcapital.com.au.

Channel Investment Management Limited

^{*} In some cases, instant AML/KYC may not be achieved.

Application Booklet

Completing the Application Form

A completed application is an instruction to invest in the NZS Global Growth Trust. This application form relates to the Product Disclosure Statement dated 28 October 2025 ('PDS') issued by Channel Investment Management Limited ACN 163 234 240 AFSL439007 ('CIML' or 'Responsible Entity'). Please read the PDS in full before completing this Application Form.

Incomplete Applications

Application monies accompanying an incomplete application will be retained in a trust account pending receipt of the required information. Interest earned on these application monies will form part of the Fund. Units will not be issued as a result of the interest earned.

Tax File Number

Investors have the choice of whether or not to quote their Tax File Number (TFN) when opening a Fund account. The investor does not have to quote a TFN, but it is a requirement of relevant taxation laws that CIML will withhold tax(plus Medicare levy) from income distributions to the investor if they have not quoted their TFN or provided appropriate exemption information. Collection of TFN information is authorised, and its use and disclosure are strictly regulated by, taxation and privacy laws. If you are exempt from quoting a TFN, please quote the equivalent ATO code in the TFN space provided (e.g. Aged pension is 444 - 444 - 441).

Additional Applications

Additional investments can be made at any time by sending a completed additional unit application form, together with your electronic funds transfer (EFT) confirmation. It is not necessary for you to complete another Application Form. A copy of the additional unit application form is located at the back of this Application Booklet.

Submitting the Application Form

Apex Fund Services Attn: Unit Registry GPO Box 4968 Sydney, NSW, 2001

Need help completing the Application Form?

Contact Channel Client Services T: 1800 940 599

E: clientservices@channelcapital.com.au

Power of Attorney

If signing under a power of attorney, you are certifying that the power of attorney has not been revoked (a certified copy of power of attorney must be submitted with this application unless it has already been sighted). For the purposes of antimoney laundering and counter-terrorism laws, the attorney must complete the same identification requirements as an individual (see PART F - Section A).

Anti-Money Laundering/Counter-Terrorism Financing

Under anti-money laundering and counter-terrorism financing laws, we are required to collect and verify certain information about investors including, if appropriate, the beneficial owners of investors. Without this information, we may refuse to process the application until the requested information has been received or refuse to accept the application altogether. We may also refuse to process a transaction in relation to your investments, or delay or block or refuse a transaction, where we have reasonable grounds for believing that the transaction will breach relevant laws.

Politically Exposed Persons (PEP)

Under anti-money laundering and counter terrorism laws, we are required to ask you whether you are a PEP meaning an individual:

- who holds a prominent public position or function in a government body or an international organisation, including:
 - a. Head of State or head of a country or government; or
 - b. government minister or equivalent senior politician;
 - c. senior government official; or
 - d. Judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge of a court equivalent seniority in a foreign country or international organisation; or
 - e. governor of a central bank or any other position that has comparable influence to the Governor of the Reserve Bank of Australia; or
 - f. senior foreign representative, ambassador, or high commissioner; or
 - g. high-ranking member of the armed forces; or
 - board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation; and
- 2. an immediate family member of a person referred to in paragraph (1), including:
 - a. a spouse; or
 - b. a de facto partner; or
 - c. a child and a child's spouse or de facto partner; or
 - d. a parent; and
- a close associate of a person referred to in paragraph (1), which means any individual who is known (having regard to information that is public or readily available) to have:
 - a. joint beneficial ownership of a legal entity or legal arrangement with a person referred to in paragraph
 (1): or
 - b. sole benefit of a person described in paragraph (1).

Privacy

CIML has a Board approved privacy policy. We collect and manage your personal information in accordance with this policy, the Privacy Act 1998 (Cth) and the Australian Privacy Principles ('APP').

CIML may collect personal information from you in the application and any other relevant forms in order to process your application, administer your investment and for other purpose permitted under the Privacy Act 1988 (Cth). Tax, company and anti-money laundering law also require some of the information to be collected in connection with an application. In some cases, we collect personal information from third parties including public sources, our related companies, referrers, brokers, agents, your adviser(s) and our service providers.

If you do not provide us with your relevant personal information, we will not be able to provide you with products or services (such as issuing you units). Privacy laws apply to our handling of personal information and we will collect, use and disclose your personal information in accordance with our privacy policy, which includes details about the following matters:

- the kinds of personal information we collect and hold;
- · how we collect and hold personal information;
- whether collection is required or authorised by law;
- the purposes for which we collect, hold, use and disclose personal information;
- the entities or persons to which personal information is usually disclosed;
- how you may access personal information that we hold about you and seek correction of such information (note that exceptions apply in some circumstances);
- how you may complain about a breach of the APPs, or a registered APP code (if any) that
- binds us, and how we will deal with such a complaint;
- whether we are likely to disclose personal information to overseas recipients and, if so,

the countries in which such recipients are likely to be located if it is practicable for us to specify those countries.

Personal information is unlikely to be disclosed to any third parties overseas.

CIML may also be allowed or obliged to disclose information by law. If an investor has concerns about the completeness or accuracy of the information CIML has about them or would like to access or amend personal information held by CIML, they can contact CIML's Privacy Officer at:

Attention: Privacy Officer

Channel Investment Management Limited GPO Box 206

Brisbane QLD 4001 Phone: 1800 940 599

Our privacy policy is publicly available at www. channelcapital.com.au or you can obtain a copy free of charge by contacting us.

If you are investing indirectly through an IDPS, we do not collect or hold your personal information in connection with your investment in the Fund. Please contact your IDPS operator for more information about their privacy policy.

Correct Forms of Registrable Names

An application must be signed in the name(s) of natural persons, companies or other legal entities. At least one name given in full and the surname is required for each natural person.

The name of the beneficiary or any other non-registrable name should be included by way of an account designation, completed as described in the examples of correct forms of registrable names below.

Type of Investor	Correct Form of Registrable Title
Individual or Joint Applicants Use given names in full Do not use initials	Mr John Alfred Smith and Mrs Mary Anne Smith
Partnerships Use partners' personal names Include the name of the partnership as account designation	Mr John Smith and Mr Michael Smith < John Smith and Son A/C >
Minor (a person under the age of 18) Use the name of the responsible adult Include the name of the minor as account designation	Mr John Smith < John Smith >
Company Use company title Do not use abbreviations	ABC Pty Ltd
Trusts Use trustee(s) personal name(s) or registered company name Include the name of the trust	Mrs Sue Smith < Sue Smith Family A/C >
Deceased Estates Use executor(s) personal name(s) Include the name of the deceased	Ms Jane Smith < Est John Smith A/C >
Association Use office bearer(s) personal name(s) Include the name of the club, etc.	Mr Michael Smith < ABC Tennis Association A/C >
Superannuation Funds Use name of trustees and fund Do not use the name of the fund only	Mr John Henry Smith and Mrs Susan Jane Smith < J & S Smith Super Fund A/C >
Co-operative Use name of co-operative Do not use abbreviations	ABC Co-operative Limited
Government Body Use name of government body	ABC Department or Department of ABC

Application Form checklist

Please complete the sections of the application form that apply to you and then return the signed form with the relevant document(s) to the address provided.

Type of Investor	Sections to be Completed in Application Form		Verification Documentation Required
	PART A	PART B, C, D & E	PARTE
Individual / Joint Applicants	Section 1		Section A
Regulated Trust (e.g. SMSF) - Individual Trustee/s	Sections 1 & 3		Section B
Regulated Trust(e.g. SMSF)- Corporate Trustee	Sections 2a & 3		Section B
All Other Trust Types - Individual Trustee/s	Sections 1(trustee and beneficial owners) & 3		Section H
All Other Trust Types – Corporate Trustee	Sections 1 (for beneficial owners), 2a & 3	Complete all Sections in Part B & C (as applicable) Ensure Part D – Investor Declaration is signed by all required applicants	Section H
Private and Unlisted/ Unlicensed Public Australian Company	Sections 1 (for beneficial owners) & 2a		Section C
Listed / Licenced Australian Company	Section 2a		Section E
Foreign Listed/Licenced Company (Australian Registered)	Sections 2a & 2b		Section D
Foreign Private and Unlisted/ Unlicensed Public Company (Australian registered)	Sections 1 (for trustees and beneficial owners), 2a & 2b		Section F
Foreign Company (not registered in Australia)	Sections 1 (for trustees and beneficial owners), 2a & 2b		Section G
Partnerships	Sections 1 & 4		Contact Channel
Association / Registered Cooperative / Government Body	Sections 1(as applicable) & 5		Contact Channel
Minor / Deceased Estate	Sections 1(for trustees) & 6		Sections A and J or I (as applicable)

NZS Global Growth Trust CLASS B UNITS

APIR: CHN3393AU

APPLICATION FORM 28 October 2025

completed application is an instruction to invest in the NZS Global Growth Trust. ease complete the sections of the form that apply to you and return the signed form with the relevant ocument/s to: **Apex Fund Services** tn: Unit Registry

PART A

Section

Investor Details Individual/Joint/ Trustee/Director/ Partner/25% or more Shareholder or Beneficial Owner

If there are more than (2) two Individuals, Partners, 25% or more shareholders or Beneficial Owners, please print additional pages.

Politically Exposed Persons (PEP) as defined on Page 3

Section 2(a)

Company Details Private/Public

To proceed with this application, you must have a licenced financial adviser and have Channel's Client Services team if you require any further clarification on this requ	ve received personal financial advice or be deemed a Wholesale Investor. Please contact uirement. Email clientservices@channelcapital.com.au or call 1800 940 599.
Please cross boxes where appropriate.	
Investor 1 Mr Mrs Miss Ms Other (e.a. Dr)	Investor 2 Mr Mrs Miss Ms Other (e.a. Dr)
Mr Mrs Miss Ms Other (e.g. Dr) Given Name(s)	Mr Mrs Miss Ms Other (e.g. Dr) Given Name(s)
Surname Date of Birth	Surname Date of Birth
Date of Birth	bate of Birth
Residential Street Address	Residential Street Address
State Postcode	State Postcode
Country	Country
Are you, or is a family member or close associate PEP?	Are you, or is a family member or close associate PEP?
No Yes If yes, please provide details below	No Yes Ifyes, please provide details below
If you are a beneficial owner or controlling person indicate your role (such as managing director)	If you are a beneficial owner or controlling person indicate your role (such as managing director)
Are you an Australian resident for taxation purposes? Yes No If yes, please provide your Tax File Number or Exemption Number.	Are you an Australian resident for taxation purposes? Yes No If yes, please provide your Tax File Number or Exemption Number.
If no, please also complete section 12 of the application form as required.	If no, please also complete section 12 of the application form as required.
Name of Company (as registered with ASIC or foreign registration by	oody)
Tax File Number or Exemption Number	Other Identification Number
Australian Business Number	
Registered Address (PO Box NOT acceptable)	Principal Place of Management (if any)
State Postcode	State Postcode
Country	Country
A Private Company A Public Company	
Other type of Company (please state)	
For private companies, state the full name of each Director:	
Director1:	Director 2:
Director 3:	Director4:

If there are more directors, provide details on a separate sheet and attach to your application form.

Please also complete Section 1 of this form for any shareholders with ownership of 25% or more, or if there is no shareholder with ownership of 25% or more, individuals who directly or indirectly control (includes exercising control through the capacity to determine decisions about financial or operational policies; or by means of arrangements, voting rights of 25% or more, or power of veto) the company, or if no such person exists, for each managing official or director of the Company.

Section 2(b) Business Address in Australia (if applicable) Further Information for Foreign Companies Postcode State $NOTE: Please \ also \ complete \ Section 1 \ of the form (attach \ additional \ page(s) if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \ who \ additional \ page(s) \ if \ necessary) for \ all \ directors \ and/or \ shareholders \$ hold an interest of greater than 25%. Country where company was formed, incorporated or registered: If the company is registered by a foreign registration body, the name of the body and any registration number is sued and any registration number is sued as the following the following the properties of the pRelevant foreign body: Registration Number: Full name of Trust Details Trust/ Superannuation Fund Full business name (if any) Country where Trust established Tax File Number or Exemption Number Type of Trust (Select one of the following trust types and provide the information requested): Registered management investment scheme Provide Australian Registered Scheme Number (ARSN) Regulated trust (e.g. SMSF) Provide name of regulator (e.g. ASIC, APRA, ATO) Provide the Trust's ABN or registration/licensing details Government superannuation fund Provide name of the legislation establishing the Fund Other trust type Trust description (e.g. Family, unit, charitable, estate) Name of trust beneficiaries or details of the class of beneficiaries: Number of Trustees**: Full Name of Settlor*: * Only required where initial contribution to the trust was greater than \$10,000 (unless settlor is deceased). **Note: Please complete Section 1 for each Individual Trustee and each beneficiary of the trust, or complete Section 2 for a Corporate Trustee Please also complete Section 1 for individuals who directly or indirectly control (see section 2(a) for what constitutes "control") an unregulated trust. Section 4 Name of Partnership Partnership Details Full registered business name (if any) of Partnership Country where Partnership established $NOTE: Please \ provide \ the \ full \ names \ and \ details \ for \ each \ of \ the \ Partners \ in \ Sections \ 1, 2, 3 \ or \ 4 \ of \ the \ form \ as \ required \ (attach \ extra \ extr$ page(s) if necessary).

Section 5	Please cross type of Investor				
	Association Registered Co-Operative Government Body				
Association/ Registered Co-	Name of Association/Registered Co-operative/Government Body				
operative/Government					
Body Details	Tax File Number or Exemption Number Other Identification Number				
	Australian Business Number				
	Registered Address				
	State Postcode Country				
	Principal place of business/operations address (if same as registered address, please write 'AS ABOVE').				
	State Postcode Country				
	Full name of the association's President, Secretary and Treasurer (or other equivalent officers in each case). This section is only to be completed by Associations.				
	Name of President				
	Name of Secretary				
	Name of Treasurer				
	Please complete Section 1 with the full names and details of the President, Secretary or Treasurer (attach additional page(s) if necessary) and provide ID for one of the officers.				
	The Government Body is an entity established under legislation of:				
	The dovernment body is arrentity established under legislation of .				
	Commonwealth of Australia				
	State, Territory or foreign country (if so, name of state, Territory or foreign country)				
Section 6					
Minor/Deceased Estate	Please cross type of Investor (if applicable)				
	Account Designation: Deceased Estate				
	Designation Name (full name of relevant minor or deceased person)				
	< A/C>				
	Please provide the full names and details of the relevant Trustee(s) by completing Section 1 of the form.				
PART B					
TARTE					
Section 7	Mailing Address Contact Phone				
Contact Details	Email				
These details will be					
used for all administration	State Postcode				
correspondence.					
By providing your email	Country				
address(es), you agree					
to receive all communications,	As an investor in the Fund, you will receive market insights, performance updates and relevant Fund information. You may				
including transaction					
confirmations, statements, reports	clientservices@channelcapital.com.au.				
and other notifications,					
by email.					

Section 8	If you would like someone other than the Contact or your Adviser their details here.	tob	to be able to enquire about this investment, please provide us with	
Additional Enquirer	Given Name(s)		Surname	
	Date of Birth		Company (if applicable)	_
Section 9 Adviser Details	Have you received personal financial advice from a licenced fin Please cross one of the following options:	ianc	ncial adviser in relation to this investment?	_
	Yes Please provide your adviser details in the to give your financial adviser access to yo		provided fields below, noting that by completing this section you colur information.	nsent
	No If you have not received personal financia you must be a Wholesale Investor as defi		advice in relation to your investment in this fund, to be eligible to in ed under the applicable legislation.	vest,
	By completing this section, you consent to give your financial a	dvis	viser access to your account information.	
	Adviser Name		Adviser Company (if applicable)	
	Dealer Group Name		AFSL No.	
	Adviser Email		Adviser Phone	
Section 10 Investment Details	Please note that application funds will not be invested until comminimum investment amount is \$100,000.	mple	npleted and signed Application Form is received and accepted.	-
	Amount			
	PAYMENT DETAILS			
	BSB Account Number Account Name		Reference	
	082 124 440 379 464 NZS Global Growth Applications Accour			
	SOURCE OF FUNDS Please cross the most relevant option.			
	Retirement Savings Sale of Assets	;	Financial Investments	
	Employment Income Inheritance/6	Bift	ft	
	Business Activities Other (provide	det	detail)	
Section 11 Nominated Account and	The following account will be credited for payment of distribut Account Name	ions	ons and redemptions (if applicable).	_
Distribution Details	Financial Institution		Branch]
Details	BSB(Branch)	Ac	Account Number	1
		om t	m the Fund to be paid. Income is reinvested automatically by the	
	Responsible Entity unless otherwise instructed. Reinvested in the Fund Credit to my/our nor	nina	inated account	

FATCA and CRS -Self-certification Declaration

 $Information about investors that are foreign tax residents \, must be \, reported \, to \, the \, Australian \, Tax \, Office \, (ATO) in \, accordance \, with \, accordance \,$ $international\ tax\ reporting\ standards\ and\ laws\ to\ which\ Australia\ is\ subject.\ These\ include\ the\ OECD\ Common\ Reporting\ Standard$ (CRS) and United States Foreign Account Tax Compliance Act (FATCA). If you require further information on Australia's obligations under CRS or FATCA, please visit the ATO website www.ato.gov.au

Tax Residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based

MSF: Sections 12 and 3 do not need to be completed if you are a Regulated Australian Cuper Fund	on their domicile, place of management, principal office or incorporation, the amount of time a person spends in a country, the location of a person's residence or place of work. For the US, tax residency can be as a result of citizenship or residency. A TIN is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or a Social Security Number in the US. If a TIN is not provided, please list the reason (of the of the three reasons specified as A, B or C) for not providing a TIN.				
Section 12	Individual 1				
ndividuals	Are you a tax resident of another country?				
	No				
	Yes Please provide your name an	nd Tax Identification Number (TIN) below:			
	Country of Tax Residence	Tax Identification Number (TIN)	Reason Code if no TIN provided		
	1				
	2				
	3				
	Reason A: The country of tax residency do Reason B: The individual has not been is Reason C: The country of tax residency do	sued with a TIN.			
	Individual 2				
	Are you a tax resident of another country?				
	No				
	Yes Please provide your name an	d Tax Identification Number (TIN) below:			
	Country of Tax Residence	Tax Identification Number (TIN)	Reason Code if no TIN provided		
	1				
	2				
	3				
	Reason A: The country of tax residency do Reason B: The individual has not been is Reason C: The country of tax residency do	sued with a TIN.			
	Select the appropriate entity type from on	e of the four options below and provide requ	uested information.		
Section 13a Intities (Company,	1. A Financial Institution (A custodial or depository institution, an investment entity or specified insurance company for FATCA/CRS purposes)				
rust, Partnership,	Provide the entity's Global Intermediary Ide				
Please select option 1, 2,	If the entity is a Financial Institution but does not have a GIIN, provide its FATCA status(select one)				
or 4 in this Section	Deemed Compliant Financial Institution				
	Excepted Financial Institution				
	Exempt Beneficial Owner				
	Non-Reporting IGA Financial Inst	itution			
	Non-Participating Financial Inst	itution			
	Other (describe the FATCA status	in the box provided)			

Section 13a Entities (Company, Trust, Partnership, Association, etc.)	2. Public Listed Company, Major Organisation, Central Bank, and A Foreign Charity or an Active reporting period, less than 50 less than 50% of assets held For other types of Active NFE Financial Account Informat If the entity is a Foreign Chari (Country of Tax Residency for the Country of Tax Res	ty located in a Non-Participating CRS Jurisd (Country of Tax Residency for Entity) rity Owned Subsidiary of a Public Listed Com an Australian Registered Charity or Deceas e Non-Financial Entity (NFE) (Active NFEs i 0% of their gross income was passive incom d produced passive income) Es, refer to section VIII in the Annexure of the ion'at www.oecd.org) ity or Active NFE, please proceed to section	pany, Governmental Entity, International sed Estate. Include entities where, during the previous e(e.g. dividends, interests and royalties) and OECD 'Standard for Automatic Exchange of
Section 13b Country of Tax Residency for Entity		country of tax residency and tax identification able. If a TIN is not provided, please list the real TIN. Tax Identification Number (TIN) Tit issue TINs to tax residents. ed with a TIN.	on number (TIN). Please include multiple eason (of the of the three reasons specified as Reason Code if no TIN provided
Section 13b.1	For Companies only - Are any of its beneficial Yes - Please complete section 12 for For Unregulated Trusts only - Are any of its of Unregulated Trust, which includes all trustees Yes - Please complete section 12 for If the Trustee is a company - Are any of the control of the Trustee company, which includes beneficials) tax residents of countries other the Yes - Please complete section 12 for the Company - Are any of the control of the Trustee company, which includes beneficials and the Company - Are any of its of the Company - Are any of the	r those individuals No controlling persons (an individual who directs, settlors, protectors and beneficiaries) tax r those individuals No company's controlling persons (an individual wicial owners controlling more than 25% of than Australia?	tly or indirectly exercises control over the residents of countries other than Australia?

Investor Declaration

By completing and signing the Application Form, the investor acknowledges, agrees and consents as follows:

- a. I/We have read and understood the PDS to which this application relates and agree to be bound by the provisions of the Fund. Constitution:
- b. I/We have received personally a complete and unaltered PDS prior to completing the Application Form and declare that all the details given in this Application Form are true and correct;
- c. I/We confirm that I/we are in compliance with all relevant laws and regulations (including, without limitation, the requirements of the Corporations Act) and will not cease to be in compliance if I/we are allocated Units;
- d. I/We authorise the use of the TFN information provided on the Application Form in respect to my/our investment;
- e. I/We acknowledge that neither CIML, nor its associates, guarantee the capital invested by investors or the performance of the specific investments of the Fund;
- f. I/We acknowledge that the provision of the products available through the Fund should not be taken as the giving of investment advice by CIML, as CIML is not aware of the investor's investment objectives, financial position or particular needs:
- g. I/We acknowledge that I/we are responsible for ensuring that the information on the Application Form is complete and
- h. I/We have such knowledge and experience in financial and business matters that I/we are capable of evaluating the merits and risks of a purchase of the Units and I/we acknowledge that an investment in the Fund involves a degree of risk;
- i. I/We have the financial ability to bear the economic risk of the investment in the Fund;
- j. I/We have had access to all information that I/we believe is necessary or appropriate in connection with this application for Units. I/We acknowledge and agree that the only information and representations provided by CIML are those contained in the PDS to which this Application Form relates;
- k. I/We have made and relied upon my/our own assessment of the Fund and have conducted my/our own investigation with respect to the Application and the Fund including, without limitation, the particular tax consequences of subscribing, owning or disposing of the Units in light of my/our particular situation as well as any consequences arising under the laws of any other taxing jurisdiction;
- I. Except to the extent that liability cannot by law be excluded, I/we acknowledge that none of the directors, officers, employees or advisers of CIML or the Fund, or any of their respective related bodies corporate, accept any responsibility in relation to the Application;
- m. I/We acknowledge that the Fund, CIML and its affiliates will rely upon the truth and accuracy of the foregoing acknowledgments, representations, warranties and agreements. I/We indemnify the Fund, CIML and their affiliates against any loss, damage or costs incurred and arising out of or in relation to any breach by me/us of the acknowledgments, representations, warranties and agreements;
- n. I/We agree that CIML, may:
 - i) require me/us to provide any additional documentation or other information and perform any acts to enable compliance with any laws relating to anti-money laundering and counter terrorism financing ('AML'), US Foreign Account Tax Compliance Act ('FATCA'), and the Common Reporting Standards ('CRS') or any other law or regulation;
 - ii) at its absolute discretion and without notice to me/us, take any action it considers appropriate, including blocking or delaying transactions on my/our account or refuse to provide services to me/us to comply with any law relating to AML or any other law; and
 - iii) in its absolute discretion and without notice to me/us, report any or any proposed transaction or activity to anybody authorised to accept such reports relating to AML or any other law;
- o. I/We certify that if we are signing under a power of attorney, the power of attorney has not been revoked;
- p. I/We have read and understood CIML's privacy collection statement in this Application Booklet and understand that a copy of the Privacy Policy is publicly available at www.channelcapital.com.au
- q. I/We consent to my/our personal information being collected, held, used and disclosed in accordance with the Privacy Policy.
- r. I/We consent to CIML disclosing this information to my/our financial adviser (named in this form). Where the financial adviser no longer acts on my/our behalf, I/we will notify CIML of the change.
- s. If investing as a trustee, on behalf of a superannuation fund or trust, I/we confirm that I/we am/are acting in accordance with my/our powers and authority under the applicable trust deed. In the case of a superannuation fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993 (Cth);
- t. I/We make an offer to become an investor in the Fund and that offer cannot be revoked but we acknowledge that CIML may accept or reject this Application Form in whole or in part; and
- u. I/We am/are not a foreign person as defined Australian Foreign Acquisitions and Takeovers Act 1975 (Cth) and not a "foreign government investor" as defined in Foreign Acquisitions and Takeovers Regulation 2015 (Cth), unless disclosed in writing to CIML (including if the Investor is a resident of New Zealand).

Investor Declaration	Name 1	
	Capacity	Signature
	(i.e. Individual/Trustee/Director/Secretary/Partner/ Authorised Signatory)	Date / / /
	Name 2	
	Capacity	Signature
	(i.e. Individual/Trustee/Director/Secretary/Partner/ Authorised Signatory)	Date / / / / / / / / / / / / / / / / / / /

Section A

Individuals/Joint Applicants

Minimum Identification Required

For each Investor please provide:

- a) an original or certified copy of a valid Driver's Licence (Australian State or Territory, or Foreign Country equivalent) with photograph; or
- b) an original or certified copy of a passport issued by Australian Commonwealth or expired passport which has not been cancelled and was current within the preceding two years; or
- c) Passport or similar document issued for the purpose of international travel that contains a photograph and signature of the person and is issued by a foreign government, UN or UN Agency, with English translation provided by an accredited translator if not in English;

E	English;
Or	
d)Bot (i)a	rh: n original or certified copy of a valid primary I.D. document
(,, a	National Identity Card with a photograph and signature issued by Australian Commonwealth, State or Territory; or
	Foreign National Identity Card with a photograph and signature issued by a foreign government, UN or UN Agency, with English translation provided by an accredited translator, if not in English; or
	Birth Certificate or birth extract issued by Australian State or Territory; or
	Birth Certificate issued by foreign government, UN or UN Agency, with English translation provided by an accredited translato if not in English; or
	Citizenship Certificate issued by Commonwealth government; or
	Citizenship Certificate issued by foreign government, UN or UN Agency, with English translation provided by an accredited translator if not in English; or
	Pension card issued by Centrelink;
And (ii) a	n original or certified copy of a valid secondary I.D. document: notice issued to an individual by Centrelink within preceding 12 months which records the provision of financial benefits to an
	Individual and the individual's name and residential address; or
	notice of a foreign welfare department equivalent within preceding 12 months which records the provision of financial benefit to an individual and the individual's name and residential address; or
	notice issued to an individual by the ATO or relevant foreign Taxation authority within the preceding 12 months which records the name and residential address of the individual; or
	notice issued to an individual by a local government body or utilities provider within preceding three months which records the provision of services to that residential address or that individual; or
	For persons under 18, a notice issued by a school principal within the preceding three months containing the name of the person and his or her residential address and recording the period of time that the person attended the school.
	fanaged Superannuation Fund, registered managed investment schemes, regulated trusts and Government rannuation Fund copies of:
	a search of the relevant regulator e.g.: ASIC, ATO, APRA or Trust Deed

Section B

Regulated Trust

Section C Private and Unlisted/ Unlicensed Public Australian Companies	Minimum Identification Required Original or certified copies of: a search of the relevant ASIC database, or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); and where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied. for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.
Section D Foreign Listed / Licensed Company (Australian Registered)	Australian Registered Foreign Company Original or certified copies of: a search of the relevant ASIC database, search of the licence or other records of the relevant regulator, other appropriate document(s) including reliable independent electronic data(e.g. Dun & Bradstreet report); and where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied. for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.
Section E Listed / Licensed Australian Companies	Original or certified copies of: a search of the relevant ASIC database or relevant stock exchange or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report).
Section F Foreign Private and Unlisted / Unlicensed Public Companies (Australian Registered)	Australian Registered Foreign Company Original or certified copies of: a search of the relevant ASIC or other government database, a search of the relevant foreign stock exchange, a search of the licence or other records of the relevant regulator or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); or Certificate of Incorporation or recent extract of public company register or document issued by the foreign government (including a registration certificate).
Section G Foreign Companies (not registered in Australia)	Unregistered Foreign Company Original or certified copies of: Foreign registration certificate, Certificate of Incorporation, recent extract of company register; or other appropriate document(s), including a search of the relevant government database, a search of the relevant stock exchange, a search of the licence or other records of the relevant regulator, or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); and where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied. for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.
Section H Other Trust Types	Original or certified copies of: the trust deed; if the Settler of the Trust has made a material asset contribution of >\$10,000 and is still living, the identification requirements set out in Section 'A' must be satisfied; and where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied. And In respect of one of the trustees: if the trustee is an individual, then ID required as per the individual requirements as per Section 'A'; or if the trustee is a company, then ID required as per the company requirements as per Section 'C', 'D', 'E', 'F' or 'G'.
Section I Deceased Estate	Identification as per Section 'A' for trustee; and Original or certified copies of: last Will and Testament of the deceased; and death certificate; or Grant of Probate

Section J Minor	Minimum Identification Required Identification as per Section 'A' for trustee; and Identification as per Section 'A' for minor.
	CATEGORY OF ACCEPTABLE REFEREES Certified Copy means a document that has been certified as a true copy of an original document by one of the following persons:
	Schedule 1 - Persons before whom a statutory declaration may be made:
	(a) a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described);
	(b) a person who, under a law of the Commonwealth, a State or Territory, is currently licensed or registered to practice in Australia in an occupation listed in Part 1 of Schedule 1;
	(c) a person who is listed in Part 2 of Schedule 1.
	The Statutory Declaration Regulations 2023 are accessible through the following website: www.legislation.gov.au.

NZS Global Growth Trust

ADDITIONAL UNIT APPLICATION FORM

CLASS B UNITS

on: 1800 940 599

APIR: CHN3393AU

Channel Investment Management Limited ACN: 163 234 240 AFSL:439007

Please complete this form using BLACK INK and write clearly within the boxes in CAPITAL LETTERS

 $If you require any information regarding your investments, please contact \textbf{Channel Client Services} on 1800\,940\,599.$

This additional unit application form is for existing Investors in the NZS Global Growth Trust (the 'Fund') who wish to apply for additional units in the Fund. The additional investment amount will be added to your existing investment in the Fund.

You should read the PDS to which this application relates issued by Channel Investment Management Limited ACN $163\,234\,240\,AFSL\,439007$ before completing this additional unit application form.

Section 1. Investor Identification			
Investor Reference Number			
Full Name(s) of Registered Unitholder(s	:)		
Registered Address			
Negistered Address			
Suburb	State		Postcode
Section 2. Investment Amount			
Additional Investment Amount:	\$		
SOURCE OF FUNDS - Please tick the m	nost relevant option.		
Retirement Savings	Sale of Assets Financial Inve	estments Employment Income	Inheritance/Gift
Nethernerit Savings		Employment income	Illilettance/ont
Business Activities	Other (provide detail)		
Section 3. Declaration and Author	prisation		
		e declarations conditions and acknowledgeme	ents contained under Part D 'Investor
	nd agree that they are incorporated in th hem and declare that all the details given		
		g the Additional Unit Application Form. I/We	
certify that if we are signing under a po	ower of attorney the power of attorney h	as not been revoked.	
Investor 1		Investor 2	
]	
Name Date		Name Date	
Capacity(i.e. Individual/Trustee/Directo	or/Secretary/Partner/Authorised Signato	ory) Capacity(i.e. Individual/Trustee/Dire	ctor/Secretary/Partner/Authorised Signator
Section 4. Payment Details	A No	Assess I November 1	D. (
BSB	Account Number	Account Name	Reference
082 124	440 379 464	NZS Global Growth Trust Applications Account	Please include your Investor Name in the reference field of your EFT.
		Applications Account	in the reference held of your Li 1.
Return form			
•		@	
Call:	Post to:	Email to:	:
If you have any questions in relation to	this Apex Fund Services		@apexgroup.com
form, please call Channel Client Service	Attn: Unit Registry	110111 0001	

GPO Box 4968, Sydney NSW, 2001