



Client Services contact details
Phone: Aus: 02 8456 0230 | New Zealand: 0800 894 131
Send your form by email:
btfunds_transactions@unitregistry.com.au
Email enquiries:
btfunds@unitregistry.com.au

Regular Investment Plan Form

Use this form if you wish to establish, cancel, or make changes to a Regular Investment Plan for a fund you have existing holdings in.

If you do not have existing holdings in a fund and would like to establish a Regular Investment Plan into that fund, you must complete the relevant Application Form (through which a Regular Investment Plan can be established), found on our website <https://www.bt.com.au/personal/help/investment-solution-all-forms.html>

Please complete all sections in BLOCK letters and using a black pen. If you make an error while completing this form, do not use correction fluid, cross out your mistake and initial your changes.

HOW TO COMPLETE THIS FORM

Step 1 Before submitting, please ensure you have:

- Entered your **account number and account name** (exactly as shown on your latest statement) in **Section 1**.
- Indicated the **type of request** in **Section 2**.
- Completed the **fund name, amount, and frequency** in **Section 3**, and provided **direct debit details** in **Section 4**.
If you are cancelling a Regular Investment Plan for a specific fund, write the fund name in Section 3 and leave Section 4 blank.
- Read the **Acknowledgment** in **Section 5**.
- Signed the form in accordance with the **Signing Instructions** in **Section 6**.

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Send your documents to us.

If you are establishing a Regular Investment Plan

Please return this form together with a certified copy of your bank statement by post to:

BT Funds
GPO Box 804
Melbourne VIC 3001

If you are changing or cancelling a Regular Investment Plan

You may return this form either:

By post (address as above), or

By scanned copy via email*to: btfunds_transactions@unitregistry.com.au

*Please include your account number in the subject line.

IMPORTANT INFORMATION

- You must have read the PDS before completing this Regular Investment Plan form
- All words and phrases used in this form have the same meaning, if any, given to them in the PDS.
- Please ensure all relevant fields are completed. If you do not complete all relevant sections, this form may be rejected and returned to you for completion, resulting in a delay in processing your request.
- If you have any questions as you complete this form, please contact us via the details in the top right hand corner on the first page of this form.

1. INVESTOR DETAILS

Account number

Account name

2. TYPE OF REQUEST

New

Change

Cancel

3. REGULAR SAVING PLAN DETAILS

If you are **seeking to cancel an existing Regular Investment Plan**, outline the relevant fund in this section. You do not need to complete section 4.

If you are **establishing a new Regular Investment Plan**, please indicate the fund, investment amount, and frequency.

If you are an existing unit holder in the fund for which you are applying, the distribution choice below will override any pre-existing election.

If you have not previously provided your bank account information, please complete section 4 below. If you do not make an election and have not made one before, distributions will be reinvested.

BT Fund Name	Investment amount AUD\$	Regular Investment Plan Option (indicate (X) one option per fund)	
		Monthly	Quarterly
	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. ACCOUNT TO BE DEBITED

Direct debit authority – Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

I/We authorise BT Funds Management No. 2 Limited ABN 22 000 727 659 (User ID 660311) and Westpac Financial Services Limited ABN 20 000 241 127 (User ID 662814) to, until further notice, arrange for funds to be debited from the account at the financial institution identified above through the Bulk Electronic Clearing System. I/We acknowledge that this direct debit arrangement is governed by the terms of the Direct Debit Request Service Agreement found in the BT Investment Funds, BT Classic Investment Funds, BT Investor Choice, and/or BT Premium Cash Fund PDS.

Note: Please provide an original certified copy of a bank statement for verification purposes.

Financial institution name

BSB

Account number

Account name

Signature of primary bank account holder

Signature of joint bank account holder (if applicable)

Please print full name

Please print full name

Date signed (DD/MM/YYYY)

/ /

Date signed (DD/MM/YYYY)

/ /

5. ACKNOWLEDGMENT

By signing this Regular Investment Plan Form and completing section 4 (if applicable), you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and National Australia Bank Limited as set out in this Form and in your Direct Debit Request Service Agreement.

I/We consent to providing BT Funds Management No. 2 Limited and Westpac Financial Services Limited with personal information and for BT Funds Management No. 2 Limited and Westpac Financial Services Limited to collect, use, disclose and hold personal information in accordance with the applicable BT Funds Management No. 2 Limited and Westpac Financial Services Limited Privacy Policy, available on bt.com.au

6. SIGNING INSTRUCTIONS

When you apply to invest via a Regular Investment Plan, you (the applicant) are telling us you:

- acknowledge that you have read and understood a copy of the current BT Investment Funds, BT Classic Investment Funds, BT Investor Choice Funds, and/or the BT Premium Cash Fund (as applicable) PDS and you agree to be bound by the PDS and the relevant constitution(s), each as amended from time to time.
- you declare that all the details given in this form are true and correct.
- monies deposited are not associated with crime, money laundering or terrorism financing, nor will monies received from your account have any such association.
- you are not bankrupt or a minor, and
- you agree to be bound by the constitution of the Fund and the PDS as a supplemented, replaced or re-issued from time to time.

Individual - where the investment is in one name, the account holder must sign.

Joint Holding - where the investment is in more than one name, all of the account holders must sign.

Companies - where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust – the Trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney – if you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document of the Power of Attorney. I/we attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

Signature of investor 1, director/company secretary or authorised signatory

Signature

Please print full name

Date (DD/MM/YY) / /

Company officer (please indicate company capacity)	
Director	<div></div>
Sole Director and Company Secretary	<div></div>
Authorised Representative	<div></div>

Signature of investor 2, director/company secretary or authorised signatory

Signature

Please print full name

Date (DD/MM/YY) / /

Company officer (please indicate company capacity)	
Director	<div></div>
Company Secretary	<div></div>
Authorised Representative	<div></div>