

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

UNIT TRUST Account #

UNIT TRUST | SUBSCRIPTION FORM

| SECTION 1 | | | | | |
|------------------------------------|----------------------|--|---|---------------------------------------|----------------------------------|
| | | Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> | Primary Holder <input type="checkbox"/> | Joint Holder <input type="checkbox"/> | Company <input type="checkbox"/> |
| Company Name: <input type="text"/> | | | | | |
| Surname | First Name | Middle Name | Maiden Name (if applicable) | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | | |
| Address | | | I.D.# | | |
| <input type="text"/> | | | <input type="text"/> | | |
| Address | | Email Address | | | |
| <input type="text"/> | | <input type="text"/> | | | |
| Telephone Number | Mobile Number | Fax Number | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | | |

OFFERING CIRCULAR

I/we acknowledge that I/we have received and read a copy of the NCB Capital Markets Limited Unit Trust Offering Circular and that I/we fully understand and agree to each of the terms and conditions contained therein.

ENCASHMENT PAYOUT PERIOD

All efforts are made to settle payments within three (3) business days of the day on which units are redeemed provided that the necessary documentation has been received. I am aware, however, that this process may take longer than three (3) business days and that, pursuant to the Trust Deed, the Unit Trust Manager, NCB Capital Markets Limited is entitled to take additional time to complete the process.

EARLY REDEMPTION FEES

I/we acknowledge that where a redemption is effected before the expiration of the required minimum holding period an Early Redemption Fee of up to 4% will be deducted from the principal amount originally invested. In the case of partial redemptions the applicable fee will only apply to the portion of the units redeemed.

| Section 2: SUBSCRIPTION DETAILS | | | | | |
|---|------------|-----------------------|--------------|----------|--|
| Portfolio(s) Uncleared <input type="checkbox"/> | Value (\$) | Source of Funds / A/C | Client A/C # | Comments | |
| CAP M Fund - Money Market Portfolio 2 | | | | | |
| CAP B Fund - J\$ High Yield Portfolio 3 | | | | | |
| CAP E Fund - Caribbean Equity Portfolio 4 | | | | | |
| CAP xM Fund - US\$ Market Portfolio 2 | | | | | |
| CAP xB Fund - US\$ Bond Portfolio 3 | | | | | |
| CAP iB Fund - Indexed Bond Portfolio 5 | | | | | |
| Total \$ Amount (in words) | | | | | |

Authorized Signature _____ Date: _____

Authorized Signature _____ Date: _____

| |
|-------------------------------------|
| <p><i>Company Seal or Stamp</i></p> |
|-------------------------------------|