


Transfer application form

Once you have completed and signed this application please send it to: HSBC Trust Company (UK) Limited, Frobisher House, Nelson Gate, Commercial Road, Southampton, SO15 9DF. Telephone 08456 066 241 (Textphone 08457 660 391)*.

This application form must be signed in Section 4 and Section 5 by the Registered Contact

1. Personal details of the Registered Contact (RC)

 Please refer to the section 'Your Information' within the HSBC Child Trust Fund ("HSBC CTF") Terms and Conditions for our personal data statement that details the uses to which we will put this information.

RC's title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	Other (e.g. Dr) <input type="text"/>
RC's first name	<input type="text"/>				
RC's middle initials	<input type="text"/>				
RC's surname	<input type="text"/>				
RC's date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				RC's sex <input type="checkbox"/> Male <input type="checkbox"/> Female
RC's address	<input type="text"/>				
	<input type="text"/>				
	<input type="text"/>			RC's postcode	<input type="text"/>
RC's home telephone. no.	<input type="text"/>			RC's daytime/work telephone no	<input type="text"/>

We may use your details to contact you, as Registered Contact for the Child, for service-related reasons regarding the HSBC CTF and any other accounts, products, or service, we provide to you.

Existing HSBC or first direct customers only:

Sort Code	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	Bank Account No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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2. Personal details of the Child

Child's title, if any	<input type="text"/>				
Child's first name	<input type="text"/>				
Child's middle initials	<input type="text"/>				
Child's surname	<input type="text"/>				
Child's date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				Child's sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Child's Unique Reference Number (URN)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				
Child's address	<input type="text"/>				
	<input type="text"/>				
	<input type="text"/>			Postcode	<input type="text"/>

We may use the Child's details to contact them for service related reasons regarding the HSBC CTF, once they are 16 years old. If the Child is, or becomes, permanently resident outside the UK, you may need to complete a Non-Resident Regulatory Details Form, which is available from your local HSBC Bank branch. Alternatively you can call 08456 066 241 (textphone 08457 660 391)*.

*Lines are open 8am to 6pm Monday to Friday (excluding public holidays). To help us continually improve our service and in the interests of security, we may monitor and/or record your communications with us.

3. Current Child Trust Fund provider

Name of company										
Address										
						Postcode				
Account number										
Type of Child Trust Fund	<input type="checkbox"/>	Stakeholder				<input type="checkbox"/>	Non-stakeholder			

4. Declaration

I apply to transfer a Child Trust Fund in the name of the Child named in Section 2 of this Application Form.

I declare that:


- I am 16 years of age or over.
- I have parental responsibility for the Child.
- I will be the Registered Contact for the HSBC CTF.
- I have received the HSBC CTF Key Features Document and Simplified Prospectus.
- I agree to the HSBC CTF Terms and Conditions.
- I understand that, except in accordance with Clause 17 of the HSBC CTF Terms and Conditions, money cannot be withdrawn until the Child reaches 18 years of age.
- The information on this form is true and correct to the best of my knowledge and I will notify HSBC Trust Company (UK) Limited without delay if any of the circumstances change affecting the information on this Application Form.
- I understand that subscriptions to this HSBC CTF are a gift to the Child named on this Application Form, who is the beneficial owner of the HSBC CTF.
- I understand that, except in accordance with Clause 17 of the HSBC CTF Terms and Conditions, that any excess Subscriptions held in the Overflow Account, in accordance with the Terms and Conditions, cannot be repaid to either myself or the person(s) who made the Subscription(s).

I understand that I must tell all persons who want to subscribe to the HSBC CTF that:

- the money they subscribe will be a gift to the Child and cannot be repaid to them; and
- if the Maximum Subscription Limit has been reached for that Subscription Year, then their money will still be a gift to the Child and this cannot be repaid to them and will be placed in the Overflow Account.

I authorise HSBC Trust Company (UK) Limited:

- To hold the Child's HM Revenue & Customs contributions, Subscriptions, Child Trust Fund investments, interest, dividends and any other rights or proceeds in respect of those investments and cash, and to make on the Child's behalf any claims to relief from tax in respect of Child Trust Fund investments.
- To hold excess Subscriptions to this HSBC CTF in an Overflow Account in accordance with the HSBC CTF Terms and Conditions.

 We may use this information as specified in Clause 19 of the HSBC CTF Terms and Conditions.

By signing this application, you agree that we can use your information in the way set out in the HSBC CTF Terms and Conditions.

Registered Contact's signature	<div>Please sign here</div>
Date	<div>D D M M Y Y Y Y</div>

5. Transfer Authority

Name of current provider		
Address of current provider		
	Postcode	

Please transfer the Child Trust Fund in the name of

Child's name		
Unique reference number (URN)		
Date of birth		Current CTF account number
Name of Registered Contact		

In accordance with the Child Trust Fund Regulations, I authorise you to disclose any information about this Child Trust Fund to HSBC Trust Company (UK) Limited.

Please sell all investments and make the transfer in cash.

Registered Contact's Signature	<div>Please sign here</div>	Date
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hsbc.co.uk

Issued by HSBC Trust Company (UK) Limited

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