

Acting on behalf of a minor

- Complete this form if you are investing on behalf of a minor
- The details of both parents/guardians must be completed where applicable.
- Send the completed form to instructions@psg.co.za.
- If you need assistance, please contact your financial adviser or one of our client service consultants on 0860 774 774 or at clientservice@psg.co.za.

Minor details

First names	<input type="text"/>
Surname	<input type="text"/>
ID number (passport number if foreign national)	<input type="text"/>

Details of parent or legal guardian

Details of parent or legal guardian 1

First names	<input type="text"/>
Surname	<input type="text"/>
ID number (passport number if foreign national)	<input type="text"/>
Home phone	<input type="text"/>
Work phone	<input type="text"/>
Cell phone	<input type="text"/>
Email address	<input type="text"/>
Relation to minor	<input type="text"/>

Are you authorised to act on behalf of the minor for this investment?* Yes No

Details of parent or legal guardian 2

First names	<input type="text"/>
Surname	<input type="text"/>
ID number (passport number if foreign national)	<input type="text"/>
Home phone	<input type="text"/>
Work phone	<input type="text"/>
Cell phone	<input type="text"/>
Email address	<input type="text"/>
Relation to minor	<input type="text"/>

Are you authorised to act on behalf of the minor for this investment?* Yes No

Please submit the following FICA documents with your application:

- A copy of your ID or your passport (if you are not a South African citizen)
- Proof of address (less than three months old)
- A copy of a SARS document that confirms your tax number
- A letter from the bank confirming your bank details (less than three months old)

[Visit our website](#) for the list of FICA documents required for minors.

*Please indicate whether one or both parents or guardians will be authorised to execute instructions, manage the investment account and update information relating to this investment on behalf of the minor.



Signatures

I, the understand, declare that I am legally authorised to act on behalf of the minor. I further declare that the above information is, to the best of my knowledge, true and correct. I confirm that the person/s authorised to act on behalf of the minor for this investment is the person/s indicated above.

Signature of parent
or legal guardian 1

Date

Signature of parent
or legal guardian 2

Date

Contact details

Physical address: Building 1, The Ingress, Corner of Magwa and Lone Creek Crescents, Waterfall City, Waterfall, 2090, Gauteng, South Africa

Postal address: PO Box 61295, Marshalltown, 2107, South Africa

Sharecall: 0860 774 774

Email: clientservice@psg.co.za

Website: www.psg.co.za