

Please read the Instructions before filling in the Application Form.

ARN Number	Sub-broker's Code No.	Bank Branch Stamp & D.P. Code No.	Bank Branch Serial No.

CANEQUITY DIVERSIFIED CANEXPO CANEQUITY TAX SAVER CANEMERGING EQUITIES
 CANINDEX CANBALANCE CANCEGO

Option Selected : (Please ✓)

Growth Growth with Automatic Repurchase
 Income/Dividend Payout Bonus Dividend Reinvestment

Gross Investment Amount (1)			* DD Charges (2)	Amount Remitted (1+2)	NRI's Address in India
Growth	Dividend	Total		In Figures (Rs.)	
				In Words (Rupees)	

Cheque/DD No. _____ Date _____ Bank & Branch _____

* Only for payments made through DD.

(Cheques/Drafts should be drawn in favour of "CANBANK MUTUAL FUND")

Particulars of Applicant

 Full Name of First / Sole Applicant / Corporate _____ Salutation Mr. Ms. M/s. Dr. Prof

PAN /GIR No. (Refer Instruction No. 12) _____ Circle/Ward/District _____

 Name of Father Husband Karta Principal Partner

Unique Identification Number (UIN) under MAPIN Database (Refer Instruction No.13) _____

 Full Name of Second Applicant _____ Salutation Mr. Ms. M/s. Dr. Prof

PAN /GIR No. _____ Circle/Ward/District _____

Unique Identification Number (UIN) under MAPIN Database _____

 Full Name of Third Applicant _____ Salutation Mr. Ms. M/s. Dr. Prof

PAN /GIR No. _____ Circle/Ward/District _____

Unique Identification Number (UIN) under MAPIN Database _____

 Mode of Holding Single Joint Anyone or Survivor

Address (P.O. Box Address is not sufficient) _____

City _____ State _____ PIN _____

Contact Details

Tel.: Office _____ Resi. _____ Fax _____

E-mail _____

Age _____ Date of Birth (If the applicant is minor) DD MM YY _____ Name of the Guardian (If the applicant is minor) _____

 Occupation (Please ✓) Service Business Professional Retired Housewife Agriculture Student Others _____

 Status (Please ✓) Individual On behalf of Minor HUF Body Corporate Partnership Firm Trust NRI Regd.Co-op Soc. Others:Specify _____

Karta in case of HUF / Principal Partner in case of Partnership Firm.

ACKNOWLEDGEMENT SLIP (To be filled in by the Sole/First Applicant)

Date ____ / ____ / ____

CANBANK MUTUAL FUND
Application No.

Construction House, 4th floor, 5, Walchand Hirachand Marg, Ballard Estate, Mumbai 400 001.

Received from Mr. / Ms. /M/s. _____
 An application for purchase of units of _____
 Scheme along with cheque / DD as detailed overleaf.
Please note : Cheques / Drafts are subject to realisation.

FOR OFFICE USE ONLY

CURRENT LOAD STRUCTURE		Stamp, Signature & Date
Entry Load	Exit Load	

