

Underlying Beneficial Owners:

(Not applicable for companies and Limited Partnerships listed on a recognised stock exchange and/or licensed and regulated in a territory recognised by the MFSA, public authorities and state corporations)

The following information must be obtained for ALL the beneficial owners:

- If a shareholder holds 25% or more of the Company's shares, then a certified true copy of the shareholder's identification document (as detailed above) must be obtained.
- If the qualifying interest is held under a nominee, trustee or other fiduciary arrangement, the client must disclose the identity of the beneficial owners or beneficiaries and also provide certified copies of the passport or identity card of the beneficial owners.

Trust Investors must provide an extract of the Trust Deed reflecting the principals to the Trust (protector, trustees, settlor, all named beneficiaries) and the signature/ seal page. They should also provide full due diligence (as detailed above) of all the principals to the Trust (as above) and a list of authorised signatories of the Trustee.

All copies should be certified by an authority empowered to certify documents.

Anti-Money Laundering: Please note that additional information and further evidence of identification may be requested prior to accepting any subscription. Please also note that your funds may not be invested until all identity verification has been completed.

2. Amount of Investment per Sub-Fund*

Dominion Global Trends – Luxury Consumer Fund (a "Sub-Fund")

Share Class (e.g. R Share Class)	Currency	Cash Amount*	Number of Shares Required* (I & R Share Classes only)
	USD		
	EUR		
	GBP		

Dominion Global Trends – Managed Fund (a "Sub-Fund")

Share Class (e.g. R Share Class)	Currency	Cash Amount*	Number of Shares Required* (I & R Share Classes only)
	USD		
	EUR		
	GBP		

Dominion Global Trends – Ecommerce Fund (a "Sub-Fund")

Share Class (e.g. B Share Class)	Currency	Cash Amount*	Number of Shares Required* (I Share Classes only)
	USD		
	EUR		
	GBP		

*Please complete either Cash Amount to be Invested or Number of Shares Required.

Subject to the minimum investment per Class in accordance with the relevant Sub-Fund's most recent Offering Supplement. Share amounts are only permissible for subscription in the I and R Share Classes. Payment can only be completed by Telegraphic Transfer or BACS (GBP only).

Payment by Bank Transfer

Please specify below the account to which payments should be transferred on redemption.

Bank:	<input type="text"/>
Address:	<input type="text"/>
Branch Code:	<input type="text"/>
Account Name:	<input type="text"/>
Account Number:	<input type="text"/>
BIC/SWIFT Code:	<input type="text"/>
IBAN Number:	<input type="text"/>
Intermediary Bank:	<input type="text"/>
Name and Branch:	<input type="text"/>
Intermediary Bank:	<input type="text"/>
BIC/SWIFT Code:	<input type="text"/>

3. Declarations*

Data Protection Disclosure:

Personal information contained in this Subscription Application will be handled by the Administrator (acting as Data Processor on behalf of the Sub-Fund) in accordance with the Maltese Data Protection legislation. I/We hereby consent to the processing of my/our information and the disclosure of my/our information to any relevant Maltese or overseas government agency, the Investment Manager and where necessary or in the Sub-Fund's legitimate interest to any company in the Administrator's and/or the Investment Manager's group of companies or agents of the Administrator and/or the Investment Manager including companies situated in countries which may not have the same data protection law as Malta. I/ We also acknowledge that such data may be transported via an open network that is accessible to the public (Internet). The data may also be transmitted across borders without any controls and can occur even when both the sender and the recipient are in the same jurisdiction.

I/We hereby apply to invest the amount subscribed above in Shares in the Sub-Fund subject to the terms of the Dominion Global Trends SICAV p.l.c. Prospectus (the "Prospectus" and the relevant Sub-Fund's Offering Supplement). I/We acknowledge that the Company reserves the right to reject an application in whole or in part. I/We further declare that having read and understood the Prospectus and the relevant Sub-Funds Offering Supplement I/We accept the risk associated with an investment in the relevant Sub-Fund, have understood the charges applicable to an investment in the relevant Sub-Fund and declare that I/we have taken appropriate professional financial advice and or legal advice.

For DC Share Class investments only:

I/We hereby declare that I/we understand that in choosing to invest in Investor Shares of the DC Share Class that I/we will not incur any initial charge on such investment and I/we agree and specifically authorise the Sub-Fund to transfer Shares to the Investment Manager from my/our holding on a quarterly basis for the first five years of such investment in order to meet the deferred charge as described in the relevant Sub-Fund's Offering Supplement.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signing Instructions: Any to sign: ☐ All to sign: ☐

Part III – Additional classification under UK FATCA

If you are a Financial Institution that is not resident in the UK for tax purposes please tick this box: ☐

Please tick all the boxes that apply:

a) your organisation is a Non-Financial Entity:

Active Non-Financial Entity ☐

Passive Non-Financial Entity ☐

b) your organisation is a Non-Profit Organisation ☐

c) a. and b. do not apply to your organisation ☐

Part IV – Passive NFFE/NFE Controlling Persons Information

If your organisation is a Passive NFFE/NFE please list below each Controlling Person, who is either a UK or a US Specified Person, including all the required information. Please attach additional pages if necessary.

Name	Country of Tax Residence	Address	TIN	City/Town and Country of Birth	Date of Birth DD/MM/YYYY

Part V – Declaration and Signature

I declare that the information provided on this form is to the best of my knowledge and belief, accurate and complete.

I agree that I will submit a new form within 30 days if any certification on this form becomes incorrect.

I certify that I have the capacity to sign for the entity identified in Part I of this form.

Print Name: _____ Signature: _____

Date: _____ Capacity: _____

5. Entity Self Certification – Other Entities

Tax regulations require us to collect certain information about each investor's tax classifications. Please complete the sections below as directed and provide any additional information that is requested.

If you have any questions about how to complete this form, please contact your tax advisor.

Should any information provided change in the future, please ensure you advise us of the changes promptly.

Part I – Organisation Details and Tax Residence

If your entity or branch has multiple countries of tax residency, please tick this box and complete one self-certification form for each country.

a) Name of the entity or organisation:

b) Permanent residence address (do not use a P.O. box or an 'in care of' address):

 City:

Postcode:* Country:

Telephone:

c) Mailing address (if different from above):

 City:

Postcode:* Country:

Telephone:

d) Country of incorporation/organisation:

e) Country of tax residence:

f) Organisation's Taxpayer Identification Number ("TIN") or Tax Reference Number:

g) If the organisation is not a US Specified Person, please tick this box: ☐

Part III – Passive NFFE/NFE Controlling Persons Information

If your organisation is a Passive NFFE/NFE please list below each Controlling Person, who is a US Specified Person, including all the required information. Please attach additional pages if necessary.

Name	Country of Tax Residence	Address	TIN	City/Town and Country of Birth	Date of Birth DD/MM/YYYY

Part IV – Declaration and Signature

I declare that the information provided on this form is to the best of my knowledge and belief, accurate and complete.

I agree that I will submit a new form within 30 days if any certification on this form becomes incorrect.

I certify that I have the capacity to sign for the entity identified in Part I of this form.

Print Name: _____ Signature: _____

Date: _____ Capacity: _____

6. To be completed by the Financial Adviser*

Adviser Name:	<input type="text"/>
Company Name:	<input type="text"/>
Address & Postcode:	<input type="text"/>
Telephone:	<input type="text"/>
Email:	<input type="text"/> @ <input type="text"/>
Financial Adviser Code:	<input type="text"/> Application Code: <input type="text"/>

7. Declaration by Introducer/Financial Adviser*

I/We confirm to the Administrator that:

1. I/We have personally obtained evidence of identity of the customer/s appearing on this application and have satisfactorily verified such evidence;
2. I/We have identified the source of wealth/funds in respect of this application;
3. I/We have taken any other action as required by and in accordance with the applicable Prevention of Money Laundering and Funding of Terrorism Regulations and Rules to which I am/we are subject;
4. I/We maintain at our offices, the necessary identification and verification records and other relevant documentation to ensure a proper audit trail in relation to 1, 2 and 3 above;
5. Any of the records required above are available if required by the Administrator;
6. Should there be any relevant or material changes to the above records, I/we will immediately inform the Administrator of the said change; and
7. That I/we will inform the Administrator if it comes to my/our knowledge that any declaration made by me/us in the application is untrue.

Signature of Introducer/Financial Adviser: _____ Date: _____

The Sub-Funds do not intend to operate equalisation arrangements. However, to compensate for this, the Sub-Funds are required to make some adjustments to the calculations of reportable income per share for UK tax purposes. Although adjustments for equalisation will be made to these calculations, there should be no noticeable impact for investors.

It is also proposed that each Share Class shall be accumulating (and hence not distributing) and therefore for the purposes of Regulation 92C, it is likely that the relevant Share Class will only have one computation period, which will be 12 months long.

The state of the origin of the Fund is Malta. This document may only be distributed in or from Switzerland to qualified investors within the meaning of Art. 10 Para. 3, 3bis and 3ter CISA. The Representative in Switzerland is Oligo Swiss Fund SA, Av Villamont 17, 1005 Lausanne, Switzerland, whilst the Paying Agent is Banque Cantonale Vaudoise, Place St François, CH-1003 Lausanne. In respect of the units distributed in or from Switzerland, the place of performance and jurisdiction is at the registered office of the Swiss representative. The basic documents of the Fund as well as the annual and, if applicable, semi-annual report may be obtained free of charge at the registered office of the Swiss Representative.