



Additional Investment

- Navra Blue Chip Australian Share Retail Fund
- Navra Blue Chip Australian Share Wholesale Fund

1. Unit holder Number and Name

Unit holder Number

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Unit holder Name

2. Additional Investment Amount

Please indicate the additional amount in dollars below. The minimum additional amount is \$500 for the Australian Retail Fund and \$250,000 for the Australian Wholesale Fund. Cheques are to be made payable to: "NavraFunds Application Account".

Please note: cash is not accepted.

\$

3. Entry Fee (Not applicable to Navra Blue Chip Australian Share Wholesale Fund)

Entry Fee – Up to 4.4% of the investment (incl. GST)	
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Adviser name:

Adviser code:

Dealer code:

Adviser stamp:

Contact phone number:

4. Declaration and Signature

1. I/We agree to be bound by the provisions of the applicable constitution governing the Navra Blue Chip Share Funds, as amended from time to time.
2. I/We agree to be bound by the terms of the Product Disclosure Statement (PDS) for the Navra Blue Chip Share Funds and any additional variations of the PDS by way of supplementary PDS as issued by NavraInvest Limited.
3. If I/We have received the Product Disclosure Statement from the internet or other electronic means, I/We declare that it was received either personally or a printout was accompanied by the additional application form before making an additional application for units in the Navra Blue Chip Share Funds.
4. I/We acknowledge that investments in the fund are subject to investment risk, including possible delays in repayment and loss of income or principle invested.
5. I/We acknowledge that NavraInvest Limited does not guarantee the performance of the fund nor do we guarantee the repayment of capital from the fund.
6. If investing as a trustee on behalf of a superannuation fund or trust I/We confirm that I/We are acting in accordance with my/our designated powers and authority under the trust deed. In the case of superannuation funds, I /We also confirm that the fund is a complying fund under the Superannuation Industry (Supervision) act.
7. Sole signatories signing on behalf of a company that they are signing as sole director and sole secretary of the company.
8. If this additional application is made through a financial adviser the adviser may be entitled to receive payment by way of an entry fee and trailing commission.
9. If this additional application form is signed under a Power of Attorney, the attorney declares that he/she has not received notice of revocation of that power

YOU SHOULD READ THE PRODUCT DISCLOSURE STATEMENT BEFORE SIGNING THE APPLICATION FORM

Signature and Name

Signature and Name

For corporate accounts please circle appropriate title:
 Director Director / Secretary Sole Director

For corporate accounts please circle appropriate title:
 Director Director / Secretary

Date:

Date: