

Aegon Junior ISA change of registered contact form

In this form, unless otherwise specified 'I', 'me', 'you', 'your' or 'my' refers to you, the applicant named in section 2, and 'Aegon', 'we' or 'our' refers to Cofunds Limited.

The registered contact is a person with parental responsibility, or the child aged 16-18, if they so wish and have successfully applied to become the registered contact.

You should use this form to change the registered contact for an Aegon Junior ISA (JISA), including where the child aged between 16-18 wishes to take control of their Aegon JISA from the existing registered contact. The existing registered contact must sign this application to authorise this change unless where certain exemptions apply. These exemptions are explained in more detail in section 3.

Please complete this form and return it to: Aegon Cofunds Administration, PO Box 17491, Edinburgh, EH12 1PB.

Whenever you see this icon ☒, you may have to send us additional information. Please complete this form in BLOCK CAPITALS and in ballpoint pen.

1. Child and existing registered contact details

1.1 Child details

Product number

8							
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Mr / Mrs / Miss / Ms / Other – please specify

Full forename(s)

Surname

Date of birth

D	D	M	M	Y	Y	Y	Y
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Permanent residential address

Postcode

National Insurance Number (if held)

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The child doesn't have a National Insurance Number

1.2 Existing registered contact details

Mr / Mrs / Miss / Ms / Other – please specify

Full forename(s)

Surname

Date of birth

D	D	M	M	Y	Y	Y	Y
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Permanent residential address

Postcode

Where applicable, I, the existing registered contact, consent to the transfer of registered contact status in respect of this Aegon JISA to the applicant named in section 2.

Existing registered contact signature

Date

D	D	M	M	2	0	Y	Y
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2. Prospective registered contact details

I am the child named in section 1.1, aged between 16 and 18, and apply to become the registered contact of my Aegon JISA.

or

Mr / Mrs / Miss / Ms / Other – please specify

Full forename(s)

Surname

Date of birth

D	D	M	M	Y	Y	Y	Y
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Permanent residential address

Postcode

I apply to become the registered contact for the Aegon JISA of:

Child's name:

Date

D	D	M	M	2	0	Y	Y
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Tick this box if you are applying to be the registered contact because you have adopted the child named in section 1.1

3. Exemptions

The change to registered contact can't normally be made without the signature of the existing registered contact and the applicant (prospective registered contact) should arrange for the existing registered contact to sign this form to approve the change unless one of the exemptions listed below applies. If this is not possible Aegon will contact the existing registered contact on your behalf which may delay your application.

The approval of the existing registered contact is not required in the following circumstances. If applicable, tick the relevant box:

3.1 Where the child aged 16-18 wishes to operate their Junior Investment ISA, or

3.2 In the following circumstances relating to the existing registered contact:

3.2.1 The death of the registered contact; or

3.2.2 The incapacity of the registered contact; or

3.2.3 Where the registered contact cannot be contacted; or

3.2.4 Where a court order brings an end to the existing registered contact being a person with parental responsibility for the child; or

3.2.5 Where a court has appointed a guardian or special guardian of the child; or

3.2.6 Where a court orders that a person who is the existing registered contact ceases to be so; or

3.2.7 Where the applicant has adopted the child under an adoption order.

With the exception of 3.1, Aegon will need to be provided with the original, or a certified copy of the legal document/court order evidencing this. Please see the 'Who can certify a document and how they do it?' FAQ on our website for how to do this.

4. Intermediary details

4.1 Continue with current intermediary

I wish to continue with my current nominated intermediary.

4.2 Nominate a new intermediary

I wish to nominate:

Name:

of intermediary firm

as the nominated intermediary on this account.

FCA reference

If a monthly Direct Debit instruction is in place, Aegon will continue to collect regular payments and invest them in accordance with the existing fund choice and split until advised, in writing, by the registered contact that they should be stopped or amended.

5. Prospective registered contact declaration

I confirm that:

5.1 I confirm that I have received and had the opportunity to read the Aegon Platform terms & conditions as supplemented and amended by the Supplement for Aegon JISA carefully, along with the key features document(s), my personal illustration for the Aegon JISA, key investor information document(s) relating to the funds I would like to invest in and the declarations in this application, before completing this application process.

I declare that:

- 5.2 I wish to apply to be the registered contact for this Aegon JISA and I agree to be bound by the Aegon Platform terms and conditions as supplemented and amended by the Supplement for Aegon JISA.
- 5.3 I am 16 years of age or over.
- 5.4 I will be the registered contact for this Aegon JISA.
- 5.5 I have parental responsibility for the child, or I am the child.
- 5.6 The child named in section 1.1 above, or where I am the child named, will be the beneficial owner of the accounts investments.
- 5.7 I will not knowingly make subscriptions to JISAs for this child that will result in the subscription limit being exceeded.

- 5.8 The information supplied in this application, and any supplementary forms related to it, including transactional data, is correct and complete to the best of my knowledge and belief, I am aware that it is a serious offence to knowingly provide false or misleading information on the application.
- 5.9 Where regulations allow, I nominate my appointed intermediary to receive correspondence in relation to my investments. This instruction will remain in force unless my appointed intermediary has informed Aegon that they wish for this correspondence to be sent directly to me, or I no longer have an appointed intermediary to whom Aegon can send these.

I authorise Aegon to:

- 5.10 Hold the child's cash, subscriptions, investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash.
- 5.11 Make on the child's behalf any claims to relief from tax in respect of any of JISA investments.
- 5.12 Disclose details of this Aegon JISA to my appointed intermediary.
- 5.13 Where regulations allow, accept instructions from my appointed intermediary with regard to investment, disinvestment and all aspects of the administration of the Aegon JISA.
- 5.14 Pay any fees or charges specified by me to my appointed intermediary on the child's behalf from the Aegon JISA.

5. Prospective registered contact declaration – continued

- 5.15 I agree that the amount of the fee or charge reflects the terms of the agreement I have entered into with my appointed intermediary. The contract note will confirm the actual amount of the fee or charge to be deducted and paid to my appointed intermediary. If I disagree with the fee or charge then I must advise my appointed intermediary.

Date

D	D	M	M	2	0	Y	Y
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Prospective registered contact signature

X

