INVESTMENT ACCOUNT APPLICATION

For Individual, Joint and "In Trust For" Investment Accounts

Please retain a completed copy for your own records. This account is bound by the Client Account Terms and Conditions at http://steadyhand.com/accounts/forms/

Steadyhand

Steadyhand Investment Funds Inc.
1747 West 3rd Avenue
Vancouver, BC, V6J 1K7
ph. 1-888-888-3147
fax. 1-888-888-3148

☐ I am a new client; or, my Steadyhand Login ID is: _____

If you are a **NEW** client you must provide a personal cheque drawn on a Canadian bank account for the initial purchase amount, or for $1 if you are funding the account by transferring from another institution.

Please make cheques payable to **"Steadyhand Investment Funds Inc. in Trust"**.

1. Account Type (select one)

☐ Individual Investment
☐ Individual In "Trust For" (informal trust)
☐ Joint with right of survivorship (JWROS)
☐ Joint "In Trust For" (informal trust)
☐ Joint – Tenants in common

2. Primary Applicant Information

Title ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Mx.

Last Name		First Name	
SIN		Birthdate	
Address			
City		Province	
Postal		Dependents	
Home ph.		Mobile ph.	
Employer		Occupation	

Please use birthdate format YYYY-MM-DD

If you are a tax resident of a country other than Canada, please indicate the country and your taxpayer identification number (TIN):

Country _____ TIN _____ Country _____ TIN _____

Please provide memorable personal verification information:

What is the name of the first school you attended? _____ In what city did your parents meet? _____

What was the first concert you attended? _____ What street did you live on in 3rd grade? _____

Important! You must have a valid email address to open an account. By signing here, you confirm that you agree to receive trade confirmations, account statements, other account information and mutual fund documents via electronic delivery only and that you agree and accept the terms and conditions of the Electronic Delivery Agreement per the Client Account Terms and Conditions located on our website. You also authorize us to accept, by telephone, your instructions to place subsequent transactions for units of the Steadyhand Funds held in this account. All requests we receive via telephone are recorded for security purposes.

Email _____

Signed **X** _____ Date _____

Check here to subscribe to our monthly email newsletter ☐

3. Joint Applicant Information

Title ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Mx. Same address as primary owner? ☐

Last Name		First Name	
SIN		Birthdate	
Address			
City		Province	
Postal		Dependents	
Home ph.		Bus. ph.	
Employer		Occupation	

For joint accounts, you must provide a cheque from a joint bank account signed by **both** investors, OR **each** investor must provide a personal cheque for identity verification.

If there is more than one joint applicant please also complete the **Joint Account Holder Form**.

If you are a tax resident of a country other than Canada, please indicate the country and your taxpayer identification number (TIN):

Country _____ TIN _____ Country _____ TIN _____

Please provide memorable personal verification information:

What is the name of the first school you attended? _____ In what city did your parents meet? _____

What was the first concert you attended? _____ What street did you live on in 3rd grade? _____

Important! You must have a valid email address to open an account. By signing here, you confirm that you agree to receive trade confirmations, account statements, other account information and mutual fund documents via electronic delivery only and that you agree and accept the terms and conditions of the Electronic Delivery Agreement per the Client Account Terms and Conditions located on our website. You also authorize us to accept, by telephone, your instructions to place subsequent transactions for units of the Steadyhand Funds held in this account. All requests we receive via telephone are recorded for security purposes.

Email _____

Signed **X** _____ Date _____

Check here to subscribe to our monthly email newsletter ☐

This section must be signed by the Joint applicant (for Joint accounts only).

4. In Trust For Account Information

Name of beneficiary(s) _____

For In Trust For accounts, please complete the **Trust Account Agreement.**

5. Additional Account Owner(s) Information **(must be completed for all accounts)**

Will other person(s) have trading authority and/or financial interest in the account? ☐ No ☐ Yes

If yes, please complete the **Power of Attorney Form.**

Are you or anyone connected to the account a Politically Exposed Person as defined in the Terms & Conditions? ☐ No ☐ Yes

Do you wish to name a Trusted Contact Person? ☐ No ☐ Yes

If yes, please complete the **Trusted Contact Person Form**

6. Account Objectives and Investor Profile for This Account

Please ensure that your investment instructions accurately reflect your investment objectives and risk profile. Risk profile is the lessor of your risk tolerance and risk capacity. Risk profile is reflected in the expected percentage of your account that you will hold in funds in each risk category. We will use your risk tolerance and capacity in conjunction with your account application information to determine if the asset allocation in your account is appropriate. Steadyhand's equity funds are growth oriented (geared towards capital gains) and may not be a reliable income source of interest or dividends.

Investment Objective	☐ Income *max. 10% equity funds*	☐ Growth & Income *max. 60% equity funds*	☐ Growth *max100% equity funds*
Investment Time Horizon	☐ Under 3 years	☐ 3 - 10 years	☐ Over 10 years
Our funds have different risk profiles based on their expected volatility of returns. Please indicate the *percentage* you expect to hold in each category.	____ % Low risk *(Savings Fund)*	____ % Medium risk *(Income/Founders Funds)*	____ % Med-high risk *(Equity Funds)*

The Founders Fund is considered 60% equity.

Must total 100%. Note that your account holdings cannot exceed your risk profile. For example, if you indicate 50% Medium risk, you cannot hold more than 50% equity funds.

Your Investment Knowledge		☐ Low	☐ Medium	☐ High
Joint Client Investment Knowledge		☐ Low	☐ Medium	☐ High
Annual Income	☐ $0 - 35,000	☐ $35,000 - 49,999	☐ $50,000 - 99,999	☐ Over $100,000
Net Worth	☐ $0 - 99,999	☐ $100,000 - 499,999	☐ $500,000-1,999,999	☐ Over $2,000,000

For joint accounts use combined annual income and net worth.

Intended use (e.g. saving for a house, retirement) _____

Source of funding (e.g. other investment firm, income) _____

7. Initial Investment Instructions

☐ Cheque in the amount of: _____

☐ Transfer from your existing Steadyhand account # / fund: _____

☐ EFT from your bank information on file for existing Steadyhand account # (will be used for future EFT requests) _____

☐ Transfer from investment account at separate institution, approximate amount: _____

Code Fund	Amount (minimum $10,000 per fund)	Percent	Distributions: Reinvest	Distributions: Cash	FER
Select a fund...	$	%	☐	☐	
Select a fund...	$	%	☐	☐	
Select a fund...	$	%	☐	☐	
Select a fund...	$	%	☐	☐	
Select a fund...	$	%	☐	☐	
Select a fund...	$	%	☐	☐	
Select a fund...	$	%	☐	☐	
Select a fund...	$	%	☐	☐	
TOTAL:	$	**100%**			

Distributions are reinvested by default.

For transfers, please complete one **Transfer Authorization Form** per relinquishing institution.

Please make cheques to "**Steadyhand Investment Funds Inc. in Trust**". Any future Electronic Funds Transfer requests will be processed from the same account as the cheque you provide.

Please indicate which fund to purchase with $1 identification cheque(s): _____

8. Account Grouping

If you have other accounts with Steadyhand and wish to group accounts belonging to the investors signing this form for our fee reduction program and consolidated statements, please provide the account names and numbers.

Account Owner	Account Number

If you wish to consolidate statements among related investors who are not completing this application, please complete the **Account Consolidation** form.

9. Agreement

By signing here, you certify that the information you have provided in this application is true, complete and accurate, and may be relied upon by Steadyhand until you provide Steadyhand with notice of any changes. You also confirm that you have read and understand the relevant Fund Facts, the Client Account Terms and Conditions found at http://www.steadyhand.com/accounts/forms/, including the Client Relationship Disclosure, Electronic Delivery Agreement, Website Terms and Conditions, Privacy Policy, Risk of Leveraging Disclosure, and the Debit Purchase Authorization Agreement, and where applicable, the informal trust agreement, and agree to the terms and conditions set out therein. You further confirm that you will advise Steadyhand within 30 days of any change in circumstances that causes the information on this application to become incomplete or inaccurate. You acknowledge, consent to, and authorize Steadyhand to obtain identification verification checks in order to comply with the Federal Anti-Money Laundering/Proceeds of Crime Act.

Applicant Signature	**X**		Date	
Joint Applicant Signature	**X**		Date	

Please remember:

- for individual accounts, sign Section 2 & 9. For joint accounts, also sign Section 3 and Section 9.
- include your $1 identification cheque(s). Joint accounts require a signed cheque for each applicant.
- ensure that your selected investments align with the Investment Objective and Risk Profile information completed in Section 6.
- Section 5 must be completed for individual and/or joint accounts.
- watch for an email confirmation once your account is set up and funded.