

By completing and signing this form, you can authorise a named person to receive and access information on your account. The Authorised Person will NOT be able to give instructions, buy or sell investments, or change any details on your account.

Client Account Reference	<input type="text"/>
Client Name	<input type="text"/>
Client Address	<input type="text"/>
E-mail	<input type="text"/>
Tel No	<input type="text"/>
Authorised person / Attorney	<input type="text"/>
Address	<input type="text"/>
E-mail	<input type="text"/>
Tel No	<input type="text"/>
Joint Account Holder Name	<input type="text"/>

I understand that this authorisation will no longer be effective in the event of my death.

Signature (1)	<input type="text"/>	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature (2)	<input type="text"/>				