

Application form for Junior ISA (JISA) Transfer Authority			
This application form is for investment into the following Walker Crips plans:			
UK 95% Annual Kick-out Plan (HS667) (Kick-out from Year 2 and 60% Barrier) UK Step Down Kick-out Plan (HS669) (Kick-out from Year 2 and 60% Barrier)			
UK 95% Annual Kick-out Plan (HS668) (Kick-out from Year 2 and 65% Barrier) UK Step Down Kick-out Plan (HS670) (Kick-out from Year 2 and 65% Barrier)			
The closing date for Stocks & Shares and Cash JISA transfers is 2 January 2026.			
This application form can not be used to invest proceeds from a matured plan held with Walker Crips.			
Application sections			

Application sections

Please ensure all of the following sections are fully completed

- 1 Personal details 6
- 2 Investment selection
- 3 Investment details
- 4 Personal financial circumstances
- 5 Financial advice and adviser charging

- 6 Applicant declaration
- 7 Financial adviser declaration
- 8 Existing JISA transfer request

Contact

For any queries please contact: Address for all correspondence:

Website www.wcgplc.co.uk/wcsi
Email wcsi@wcgplc.co.uk
Telephone 020 3100 8880
Fax 020 3100 8822

Walker Crips Structured Investments 128 Queen Victoria Street

London EC4V 4BJ

1. Personal details				
If you are already a client of Walker Crips or have previously invested in a Walker Crips Structured Investments Plan please provide your account number:				
Registered Contact (Parent/Guardian)				
Title (Mr/Mrs/Miss/Other)	Surname			
Full forenames				
Applicant's address				
	Post code			
Date of birth	Telephone			
Country of birth	Email address			
Nationality	Place of birth			
Dual Nationality (if applicable)				
Yes No Are you resident in the UK for tax purposes? If yes, please provide your National Insurance Number				
Yes No Are you a US Person? If yes, please note that this Plan is not offered to US Persons. Please speak to your financial adviser for advice on any alternative options available to you.				
As defined by the UK Market Abuse Regulation is the first applicant considered a person discharging managerial responsibilities (PDMR)*, or a person closely associated (PCA) with a PDMR? If yes please provide details along with the stock symbol/ticker for the company in question:				

*Person Discharging Managerial Responsibilities (PDMR): A person discharging managerial responsibilities (PDMR) will typically be privy to potentially price sensitive 'inside' information in relation to the company they work for, which is also typically a public listed company, and are likely to hold senior managerial roles, for example, at Director or Board level. A person closely associated (PCA) with a PDMR is a spouse, family member, business partner or another known association.

Junior Individual Savings Account for (Child) Title (Master/Miss/Other) Surname Full forenames Child's Address (if different from above) Postcode Date of birth Child's National Insurance Number (if available) 2. Investment selection Please confirm the Plan you wish to invest into. UK 95% Annual Kick-out Plan (HS667) UK Step Down Kick-out Plan (HS669) (Kick-out from Year 2 and 60% Barrier) (Kick-out from Year 2 and 60% Barrier) UK 95% Annual Kick-out Plan (HS668) UK Step Down Kick-out Plan (HS670) (Kick-out from Year 2 and 65% Barrier) (Kick-out from Year 2 and 65% Barrier)

3. Investment details		
Please indicate the type of JISA you are transferring	Cash JISA Stocks & Shares JI	SA
i. Total amount being transferred in	£	
ii. Adviser charge deducted (if any)	f	
iii. I apply to transfer the following net investment amount	f	(min. £5,000)

4. Personal financial circumstances - registered contact (parent/guardian)
Primary source of wealth (tick all that apply)
Employment Investment Savings Business ownership/sale Property ownership/sale Pension Inheritance Family trust Divorce Gift Other Other
Primary source of funds
Select the option that best describes where the funds you will transfer to Walker Crips originate from
UK bank UK investment firm Transfer from an unregulated firm (UK or overseas) Overseas bank Overseas investment firm Internal transfer from existing Walker Crips account Other
Employment status
Full time employment Self employed Homemaker Retired Part time employment Unemployed Other
Occupation details - required (previous details, if retired):
Occupation/job title
Employer's name (if applicable)
Nature of business
Date of joining current employment DD MM YY
5. Financial advice and adviser charging
All applications must be submitted via a financial intermediary (e.g. an FCA regulated financial intermediary, investment manager or execution only broker). If you do not have a financial intermediary please contact us before submitting an application.
I/we have not received financial advice and am making this investment on an execution only basis
☐ I/we have received advice from a financial adviser
Firm name Adviser name
Have you paid the adviser charges?
Yes, I/we have paid the adviser charges separately.
No, I/we have not paid the adviser charges and would like you to pay the amount detailed in section 3 to my/our financial adviser. Please note that the maximum charge we are able to facilitate is 4% of your total investment.

6. Applicant declaration

For your own benefit and protection, before signing this application form please ensure that you have been provided with the Key Information Document (KID) and have read the Plan brochure, including the risks associated with investment in the Plan and the Terms and Conditions under which the Plan will be managed.

If you require further information or if there is anything you do not understand, please speak to your financial adviser before signing this application form.

I authorise Pershing Securities Limited, the ISA manager, to transfer my Junior ISA(s)

I declare that:

- I am 16 years of age or over;
- I am the child/I have parental responsibility for that child (delete which does not apply);
- the application form and this declaration have been completed to the best of my knowledge and belief and the information provided is true and complete;
- I will be the registered contact for the JISA.

I authorise Pershing Securities Limited:

- to hold the child's subscriptions, JISA investments, interest, dividends and any other rights or proceeds in respect of those investments and cash;
- to make on the child's behalf any claims to relief from tax in respect of JISA investments;
- I confirm that to the best of my belief the information in this form is true:
- I understand that this JISA is subject to the terms and conditions within the brochure and agree thereto.

I authorise Walker Crips Investment Management Limited (WCIM):

 to purchase, hold and administer the Plan on my behalf and in accordance with the Terms and Conditions of the Plan as set out in the Plan brochure: • to accept instructions from and release any information in relation to my investment in the Plan to my financial adviser, as detailed in Section 5 and/or Section 7 of this application form.

I authorise Pershing Securities Limited:

- to hold the child's subscriptions, JISA investments, interest, dividends and any other rights or proceeds in respect of those investments and cash, and to make on the child's behalf any claims to relief from tax in respect of JISA investments;
- I confirm that to the best of my belief the information in this form is true.

Adviser charges

By signing this application, I confirm that:

- where I have requested Walker Crips to facilitate payment of My adviser charge to my financial adviser, I instruct you to deduct the adviser charge as indicated in section 3 and pay the deducted amount to my financial adviser;
- my adviser has fully explained their charges to me and I understand that, should I exercise my cancellation rights after the adviser charge has been paid, WCIM will not return any adviser charges to me. I will need to contact my financial adviser regarding any refund;
- I understand that WCIM is simply facilitating adviser charges and any queries regarding these payments will need to be discussed with my financial adviser.

Registered Contact

Signature			
Date			

Applications must be submitted via a financial adviser

7. Financial adviser declaration (THIS SECTION MUST BE COMPLETED IN FULL)			
Decision-maker details			
Please confirm the individual(s) who made the decision to invest in this $% \left(1\right) =\left(1\right) \left(1\right) \left$	Plan:		
Registered Contact			
Other (e.g. Power of Attorney)			
If you ticked other please provide the following details:			
Full Name (Forename(s) and Surname)			
Date of Birth	Nationality		
Tax Identification Number (e.g. National Insurance number)	Dual Nationality (if applicable)		
Torget Market			
Target Market Under Product Governance rules we are required to provide particular d	ictribution information to the Issuer		
Please confirm the following in meeting distributor obligations:	istribution information to the issuel.		
Does the investor fall within the Target Market for which the Plan ha	s heen designed?		
Yes No	s been designed:		
	hobalf of an invector falling outside the Target Market		
If no, please outline your rationale for submitting an application on	Defiall of all investor failing outside the rarget market		
It is important to recognise and support vulnerable clients. If you know our records.	v your client is vulnerable, please tick this box so that we can update		
Declaration			
In submitting this application on behalf of the investor, I declare that:			
I acknowledge and understand the target market for whom the Plan			
The Plan is compatible with the needs, characteristics and objectives	of the investor;		
I have provided the investor with the KID and Plan brochure;			
 Where I have provided the investor with a personal recommendation investor's individual circumstances and investment objectives in according 			
 Where the investor is making a non-advised investment, I confirm the investor's investment knowledge and experience in accordance with 	at I have assessed the appropriateness of this product in relation to the COBS 10;		
 This application form has been completed to the best of my knowled to the investor(s); 	ge and belief and I have fully disclosed any adviser charge, if applicable,		
• I understand that any adviser charge facilitated by Walker Crips will be Terms of Business agreement being in place;	be paid after the start date of the Plan, subject to a fully completed		
• I have retained a completed Identity Verification Certificate (IDVC) and documentary evidence for all parties relevant to this application that meets or exceeds the standards set out in the Joint Money Laundering Steering Group (JMLSG) guidance. I have seen all original documents and those requiring a signature have been signed. I acknowledge that Walker Crips will rely upon this confirmation to fulfil its obligations under the Money Laundering Regulations and that the IDVC and relevant supporting documents will be provided to Walker Crips within two days of any request.			
Company name	Adviser signature		
Adviser name			
Address or adviser company stamp			
	Contact number		
	FCA number		
Postcode	Email		

8. Existing JISA	A transfer request			
I apply to transfer	the following amount to Walker Crip	s Structur	red Investn	nents
Plea	ase complete (a) or (b) as required.	I. Approx. value		
(a) I wish to	transfer my 2025/26 tax year JISA	£		The transfer to be in the form of cash. If
(b) I wish to trans	fer JISA(s) from previous tax years	£		you are transferring more than one JISA, this form can be copied.
7764 11 11	Total transfer value	£		
JISA Holder				
Title (Master/Miss/Ot	her)		Surname	
Full forenames				
Child's Address (if dif	ferent from above)			
Postcode			Date of bir	th
Child's National Insu	rance Number (if available)			
Registered Contac	t (Parent/Guardian)			
Title (Mr/Mrs/Miss/O	her)		Surname	
Full forenames				
Applicant's address				
			Post code	
Date of birth				
Existing JISA Man	ager			
Plan Manager's nam	e			
Plan Manager's addr	ess			
			Postcode	
Telephone		E	mail address	
Stocks & Shares JISA	ref. number(s)			
Cash JISA ref. numbe	r(s) (to transfer to a Stocks & Shares accou	ınt)		
within the Plan to Pe Investment Manage	rshing Securities Limited, an HMRC A	pproved IS formation	SA Manage relating to	ther with any interest, dividends, rights and cash or, and I authorise you to provide Walker Crips or my Plan(s) as may be required. If you are not in a equest and reinstate my JISA.
Signature of Parent/Guardian			Date	

All correspondence should be sent to: Walker Crips Structured Investments, 128 Queen Victoria Street, London, EC4V 4BJ. The deadline for receiving the JISA transfer proceeds is on **16 January 2026.**

128 Queen Victoria Street, London EC4V 4BJ | 020 3100 8880 | wcsi@wcgplc.co.uk | walkercrips.co.uk/wcsi

Walker Crips Structured Investments is a trading name of Walker Crips Investment Management Limited which is authorised and regulated by the Financial Conduct Authority (FRN: 226344) and is a member of the London Stock Exchange. Registered in England and Wales number 4774117.