



This form can be used to change the registered contact on a Novia Stocks and Shares Junior ISA. The registered contact on a Junior ISA can either be the client, aged 16 or over, or a person who has parental responsibility for the child. If you need any help, please speak to your Adviser or contact our Client Services Team on 0345 680 8000. PLEASE COMPLETE THIS FORM IN CAPITALS USING BLACK INK.

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

1 Eligible Child Details (this is the Investor)

Title	<input type="text"/>		
Surname	<input type="text"/>	Forename(s)	<input type="text"/>
Date of birth	<input type="text"/>	Male	<input type="checkbox"/> Female <input type="checkbox"/>
National Insurance Number (if held)	<input type="text"/>	(if none held please write NONE)	

Residential Address

House number/name	<input type="text"/>		
Street name	<input type="text"/>	Town/City	<input type="text"/>
County	<input type="text"/>	Country	<input type="text"/>
Postcode	<input type="text"/>		
Nationality (please list all)	<input type="text"/>		

Contact details

If the Eligible Child is 16 or over, please provide their contact details

Telephone (home)	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		

2 New Registered Contact Details

This application is being made by:

The Eligible Child; I am aged 16 or over and wish to be the registered contact. Please use my contact details in section 1.

or

The following individual with parental responsibility for the Eligible Child and wish to be the registered contact. Please use my contact details below.

Investor Number (required)	<input type="text"/>	(for your existing Novia Wrap Account)	
Title	<input type="text"/>		
Surname	<input type="text"/>	Forename(s)	<input type="text"/>
Date of birth	<input type="text"/>		
Relationship to Eligible Child	<input type="text"/>		

/ Junior ISA Change of Registered Contact

Residential Address

Same as child

House number/name	<input type="text"/>		
Street name	<input type="text"/>	Town/City	<input type="text"/>
County	<input type="text"/>	Country	<input type="text"/>
Postcode	<input type="text"/>		

3 Declaration

Current Registered Contact

This is required if the new registered contact is not the eligible child.

I agree to the change of Registered contact.

Current Registered Contact Name	<input type="text"/>		
Current Registered Contact Signature	<input type="text"/>	Date	<input type="text" value="DD/MM/YYYY"/>

New Registered contact

Novia relies on the information contained in the Novia Key Features Document, Novia Terms & Conditions and regulatory rules as these form the basis of the contract between you and Novia Financial plc ("Novia"). For your own protection you should read them carefully, along with the declarations below. If you do not understand any point, please seek clarification from your Adviser.

I declare that:

- > I am 16 years of age or over
- > I am the eligible child or, I have parental responsibility for the child and I will be the registered contact for the Novia Stocks and Shares Junior ISA
- > I authorise Novia to hold the 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 Junior ISA investments
- > The information given is correct and complete to the best of my knowledge and belief.
- > I have read and understood the Novia Terms & Conditions
- > I agree to indemnify Novia as the JISA manager against any liability to pay any tax or other charges which arise from the provision of false or misleading information.
- > I accept that Novia carries no responsibility for advice on the suitability of the Product Wrapper or investment decisions, and is not required to confirm suitability under the rules of the Financial Conduct Authority.
- > Where regulations allow, my nominated Adviser can receive Contract Notes and correspondence in relation to my investments on my behalf. This instruction will remain in force unless my Adviser has informed Novia that they wish for this correspondence to be sent directly to me
- > Novia has the right to liquidate investments sufficient to pay fees and charges at its sole discretion if I, or my Adviser, fail to give adequate instructions in that respect.
- > I authorise Novia to make Adviser Charge payments to my Adviser
- > I authorise Novia to Accept investment and disinvestment instructions from my appointed Adviser.
- > I will inform Novia of any changes to the details of the eligible child

Registered Contact Name	<input type="text"/>		
Registered Contact Signature	<input type="text"/>	Date	<input type="text" value="DD/MM/YYYY"/>