

SUBSCRIPTION FORM – CLASS A SHARES – CORPORATE / INSTITUTIONS

Name of Company/Institution

Contact Name

Registered Address

CITY

COUNTRY

Telephone WORK

FAX

P.O.BOX

Online Access Required YES NO

Email:

Amount of Investment B\$

Investment Account Number

Minimum initial investment \$1,000.00

(To be completed by current shareholders of the Fund only)

CFAL Bond Fund Wire Transfer Details:

Bank: CIBC FirstCaribbean (Swift: FCIBBSNS)
Account Name: CFAL Bond Fund Ltd.

Branch: Main Branch, Shirley Street (Transit: 09706)
Account Number: 201667074

Source of Funds

Required for all subscriptions over \$15,000.00

DECLARATION

I/we hereby acknowledge that I/we have read The CFAL Bond Fund, Ltd. Offering Memorandum and accept the risks associated with the Fund. I/we declare that I/we am/are an eligible investor as defined in the Offering Memorandum and I/we waive the right to be sent copies of the financial statements of the Fund, which shall be available at the registered office of the Fund for inspection.

Source of funds (if applicable): I/we certify that the source of funds listed represents the true source of funds status as of this date, and the company's subscription to the mutual fund. I/we further declare that the proceeds declared are derived from legitimate sources.

Authorized Signature _____ Authorized Signature _____

DAY	MONTH	YEAR

(Please note the Company Seal MUST be affixed by all corporate entities)

Please attach:

- Certified or Notarized copy of the entity's formation document (Certificate of Incorporation, Memorandum & Articles of Association, trust agreement, etc.)
- Certified or Notarized copy of list of authorized signatories
- Register or Listing of Directors
- Verification of identification for each Director (Certified or Notarized copy of Passport)
- Proof of address for each Director (Certified or Notarized copy of utility bill, bank statement or voters card)