

CHESSE Sponsorship – Change of Address

PLEASE COMPLETE THIS FORM USING BLOCK LETTERS AND BLACK OR BLUE PEN

A. ACCOUNT DETAILS

Shaw Account Number	<input type="text"/>	HIN (if known)	<input type="text"/>
Adviser name (if known)	<input type="text"/>		

B. INDIVIDUAL CLIENT DETAILS

Account name	<input type="text"/>
	<input type="text"/>
Designation	<input type="text"/>

C. NEW ADDRESS DETAILS

Registration Address (Share Registries and CHESSE use this address)	Tick here to use as postal	<input type="checkbox"/>	Tick here to use as residential	<input type="checkbox"/>
<input type="text"/>				
<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>
Postal Address (Shaw and Partners will contact you at this address)	Tick here to use this as the residential address <input type="checkbox"/>			
<input type="text"/>				
<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>
Residential Address or your Company's registered office	<input type="text"/>			
<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>
Mobile	<input type="text"/>	Home	<input type="text"/>	
Business	<input type="text"/>	Fax	<input type="text"/>	
Email	<input type="text"/>			

D. CLIENT SIGNATURE

The signatures below must match the signatories who originally opened the account. The form must be signed by all individual account holders or trustees, or a minimum of two directors where there is more than one director.

Name of Individual 1/Director/Sole Director/ Company Secretary	Name of Individual 2/Director/Company Secretary	Name of Individual 3/Director/Company Secretary
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Signature	Signature
<input type="text"/> *	<input type="text"/> *	<input type="text"/> *
Executed on <input type="text"/>	Executed on <input type="text"/>	Executed on <input type="text"/>
DD / MM / YYYY	DD / MM / YYYY	DD / MM / YYYY