

## ACCELERATOR SAVINGS PLAN APPLICATION FORM

Dat	e:						
D		М	М	Y	Y	Y	Y

SECTION A - PERSONAL INFO	RMATION	_		1111			
Customer Name: As per your registered ID with National Bonds							
Account No.:	ID	No.:					
SECTION B - CONTRIBUTION [	DETAILS (AED)						
Saving Plan Tenure Selected:	1 to 10 years						
Initial Funds to Start the Accelerator Plan :	Transfer from existing Savings	existing Savings Bonds Fresh Funds AED (1 Million AED Maxim					
Monthly payment method:	Direct Debit						
Initial saving amount:	Saving Amount						
Direct Debit amount:							
Select Direct Debit Start Date:	dd / mm / yy						
redemption if I continue the Accelerator terms set out herein.  I agree to be charged a subscription fee  SCAN FOR TAC  I have reviewed and available on the con code and/or the link  T&C: https://bit.ly/4a	ne year if I redeem funds/OR cancel the Accelerate Plan I may receive any subsequent bonus and prof of 0.5% of the withdrawn amount in case of redemperature of the provided on the Company's website which is provided on the Company in the Company is website which is provided on the Company is website.	ad agree that the incremental bonus will be issued as an additional saving bonds to me from the Mudarib's share of profit. The saving a Accelerator Plan, the Company has the right to forfeit the anticipated bonus for that specific year however in case of partial or rus and profit for the remainder of the term of the Accelerator Plan as long as I continue to make contributions in accordance with the set of redemption or cancellation of the Accelerator Plan before completion of 12 monthly payments.  Conditions don the QR  I have reviewed and hereby consent to the Information Memorandur & Master Client Agreement available on the company's website, provided on the QR code and/or the link below.  https://bit.ly/3H3miix					
APPLICANT SIGNATURE	FOR	OFFICIAL USE ONLY					
Date:		ignature Admitted	OID Verified	O Documents Attached			
Signature:		Name: Signature:	Sourced By	Approved By			