

Subscription Form for Nova Fund – Class CHF

I. DETAIL OF THE AIR		
ISIN	LI0449936769	
Currency	CHF	
Valuation Day	15th of each month	
Notice period for subscriptions	Day before the valuatio	n day, 4 pm (CET)
II. INVESTOR		
Investor □ Mr. □ Mrs.	□ Legal Person □ Minor	
First name(s), Title		Last name(s) / Company name
Address		City
Postcode	Country	Nationality
Country of birth	Place of birth	Date of birth
Register No.	Issuing authority	Valid until
Tax ID Number		Tax residence
Mobile (Cell phone)		Fax number
Email		Profession (exact job title)
III. ECONOMIC BACKO	ROUND	
☐ Income / Salary	☐ Inheritance / Gift ☐ Sa	avings
□Others*		
*Additional detailed information	about the origin of the funds	



IV. INVESTMENT

DETAILS FOR TRANSFER:

Hereby I/we advise following investment

Am	ou	nt*	in	CHF	

Beneficiary's name(s)

incl. 1% issue commission / Minimum amount CHF 50'000 (from EUR 300'000: 0%)

Kaiser Partner Privatbank AG (Bank) Herrengasse 23, FL-9490 Vaduz (Account holder) Nova Fund **IBAN** LI7308806025082772002 BIC SERBLI22 "Subscription" (Reason for payment) **POLITICALLY EXPOSED PERSON** I/We do not carry out a function as politically exposed person or in a public function. This is true for the past and the current situation. I/We am/are not related to such a person (e.g. family member). I/We carry out a function as politically exposed person or in a public function. If the second statement is true, please give detailed information:

INFORMATION ON ECONOMIC BENEFICIARIES

I/We acknowledge that I/we am/are the beneficial owner(s) of the investments to be contributed.
I/We acknowledge that the investor(s) is/are NOT the beneficial owner(s). Following fill out name and address and include all necessary documents of the beneficial owner(s) (ID card).

Place of birth

Date of birth

Beneficiary's addresses (Address, City, Postcode, Country):

VII. EXCHANGE OF INFORMATION

necessary information under the current and future laws and regulations. With this authorization, the agent is relieved of the compliance of secrecy and professional secrecy, to the extent required applicable laws and regulations currently in place and/or in future.	orities al
	ne paying
applicable laws and regulations currently in place and/or in future	ed under
applicable laws and regulations currently in place and/or in rature.	

The subscriber confirms that the units are not being purchased for a US person nor by a US person, who is
liable for US taxation. (US tax liability especially pertains to US citizens, persons with an US domicile or
person holding a residence authorization for USA (e.g. Green Card) and/or persons having been subject to US
taxes due to a longer stay in the USA within the last 36 months.)



VIII. AIFM

Scarabaeus Wealth Management AG Pflugstrasse 20 P.O. Box 673 FL-9490 Vaduz Liechtenstein

Phone +423 222 02 40 Fax +423 222 02 41 www.scarabaeus.li info@scarabaeus.li

IX. DECLARATIONS AND SIGNATURE(S)

The Shareholder(s) confirm(s) that he/she/they has/have been carefully informed about the risks associated with an investment in the required AIF.

He/She/They confirm(s) that he/she/they has/have received the constituting documents and has/have read, understood and agreed to the provisions contained therein, in particular the risk warnings. The constituting documents and additional yearly and half-yearly reports are available at www.lafv.li and www.scarabaeus.li. In this context, I/we acknowledge that the value of the shares compared to the issue price could rise or fall at any time and it is not guaranteed that I/we will receive back my/our invested capital (risk warnings in the prospectus).

I/We agree that my/our personal information will be processed, stored and exchanged by the AIFM and the custodian bank.

I/We agree that my/our personal data is used for direct mailing. I/We declare that the shares are NOT subscribed or acquired directly or indirectly or on behalf of a person from any other jurisdiction for which the subscription or the acquisition of shares is restricted or not permitted, and that I/we will not sell or transfer or do otherwise dispose of such shares directly or indirectly to or on behalf of a person from such a jurisdiction. In such cases I/we declare to reimburse the AIFM.

I/We declare that I/we am/are of full age and empowered to subscribe, to hold and to deal with shares. I/We agree that subscriptions, sales and fund transfers can be made by fax and PDF and processed without receipt of subsequent written confirmation.

I/We agree that the fund or AIFM will not be liable for the measures taken from the instructions by fax or PDF and the possible losses that may occur. I/We hereby confirm that the information contained in this application form is true and complete and I/we declare hereby to report any changes of my/our personal data without delay. I/We confirm my/our agreement, to compensate the AIFM for all damages, losses or costs occurred to them as a result of false, misleading or missing data. The AIFM reserves the right to reject any application.

It shall be noted that the management company / AIFM processes personal data according to the provisions of the Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation) and according to national data protection provisions. For more detailed information, see our data protection declaration on www.scarabaeus.li.

Place/date,				
investor's signature				