

Name of Company/Issuer in which Investment is held



Link Market Services Limited
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Investor Enquiries: +64 9 375 5998
Email: enquiries@linkmarketservices.co.nz
Web: www.linkmarketservices.co.nz

Full Name(s) of Registered Holding

Form fields for Full Name(s) of Registered Holding

Registered Address

Form fields for Registered Address, including Postcode

CSN/HOLDER NUMBER

Form field for CSN/HOLDER NUMBER

A MINOR(S) STATEMENT AND INDEMNITY

PLEASE COMPLETE THIS FORM IN BLACK INK USING CAPITAL LETTERS.

Form fields for Description of Securities and Number of Securities held

I/We do solemnly and sincerely declare I am/we are the parent(s)/guardian(s) for the registered holder of the securities detailed above. The abovenamed securityholder is not yet of the legal age of consent as per certified copy of birth certificate provided herewith and cannot legally deal with matters pertaining to this holding. I/we understand the registry will record my/our name(s) as being the signatory(s) for this holding as detailed below in Section (C).

B MINOR(S) STATEMENT, INDEMNITY AND TRANSFER

I/We do solemnly and sincerely declare I am/we are the parent(s)/guardian(s) for the registered holder of the securities detailed above. The abovenamed securityholder is not yet of the legal age of consent as per certified copy of birth certificate provided herewith and cannot legally deal with matters pertaining to this holding. To register the securities into the name of the parent or guardian please also complete Section (C) along with an Off Market Transfer Document. All forms should be submitted with a certified copy of the minor's full birth certificate or documentation that appoints you as the guardian.

C PARENT(S)/GUARDIAN(S) DETAILS

Form fields for Full name(s) of Parent(s)/Guardian(s)

Form fields for Address to be recorded on the Register

Form fields for Unit Number/Level, Street Number, and Street Name

Form fields for Suburb/Town and Post Code

I/we hereby indemnify the security issuer, the directors and the trustees of the security issuer, the security registrar and the directors and officers of the security registrar from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs and expenses whatsoever which may be made or brought against them by reason of compliance with this request.

Form fields for Contact Name, Telephone Number - Business Hours, and Telephone Number - After Hours

D SIGNATURE(S) OF PARENT(S)/GUARDIAN(S) - THIS MUST BE COMPLETED

Sign Here - This section must be signed and witnessed for your instructions to be executed. I/we authorise you to act in accordance with my/our instructions set out above.

Form fields for Parent/Guardian 1, 2, and 3, and their respective Witnesses

The witness(es) certifies that the person(s) who has/have signed this statement is/are known to them and has/have signed in the presence of the witness with their normal signature(s). Please complete this statutory declaration in accordance with the laws of the country in which it is declared and ensure it is legally witnessed.

Privacy Clause: Link Market Services Limited advises that Section 87 of the Companies Act 1993 requires certain information about you as a securityholder (including your name, address and details of the securities you hold) to be included in the public register of the Issuer in which you hold securities. Personal information is collected in order to administer your securityholding. If part or all of the information is not provided, then it might not be possible to administer your securityholding. Please note that the personal information collected may be disclosed to the Issuer in which you hold securities. You can obtain access to your personal information by contacting us at the address or telephone number shown on this form. Our privacy policy is available on our website (www.linkmarketservices.co.nz).