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Hassle-Free Investment Program (HIP) Enrollment Form

Account Name	
Mutual Fund Name	
Account/ Folio Number	
Mailing Address	
Contact Number	
Email Address	
Mode of Payment	

Check Details			Amount
Date	Bank-Branch Name	Check Number	

I/We understand that the number of shares computed for each investment may vary as it will be based on the Net Asset Value per Share (NAVps) of the banking day the investment is filed/booked.

Furthermore, I/We understand that the official receipt/confirmation notice representing my/our investments shall be available within ten banking days from receipt of investment. And;

Upon signing this form, I/We authorize Rampver Financials to automatically book my/our checks even without my/our approval.

 Client's Signature Over Printed Name

 Date Signed

 Name of Business Development Officer