**预约申购表**

|  |  |
| --- | --- |
| Name of Client  |  |
| Nationality |  |
| Type of Identity Document  |  |
| Document No. |  |
| Gender |  |
| Date of birth  |  |
| Date of Expiration of Identity Document |  |
| Name/Pinyin |  |
| Email  |  |
| Address |  |
| Post code  |  |
| Mobile Phone |  |
| Subscription Amount |  |
| Account/AC No. of Beneficiary  |  |
| Bank Name (to Branch)  |  |
| Name of Beneficiary (Same as Subscriber)  |  |