**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) |  |