

Foresight VCT plc

Offer for Subscription

Application Form

15 November 2023

Foresight
FOR A SMARTER FUTURE



Application Procedure

Foresight VCT plc (the Company)

Ordinary shares of 1p each in the Company (Offer Shares).

Applications Checklist

Section 1

- Complete your personal details.

Section 2

- Only to be completed if Offer Shares are to be issued to a nominee account.

Section 3

- Your total subscription amount and how this is split across tax years (if applicable).
- Your source of wealth.

Section 4

- Confirm how you would like the Company to communicate with you.

Section 5

- Dividends are paid by bank transfer. Please provide your bank details unless you have completed Section 6 or have requested your Offer Shares to be issued to a nominee.

Section 6

- Only to be completed if you wish to participate in the Dividend Reinvestment Scheme.

Section 7

- Confirm whether your investment is advised, non-advised or direct.

Section 8

- If you are an advised investor please confirm the amount of any initial adviser charge to be facilitated.

Section 9

- Signed and dated.

Sections 10-14

- To be completed by your financial intermediary.

This Application Form should be completed in full and sent by post or hand delivered to:

Woodside Corporate Services Limited
Foresight VCT Share Offer
First Floor
12-14 Mason's Avenue
London
EC2V 5BT

or submitted electronically at the following email address:
clientonboarding@foresightgroup.eu

so as to arrive as soon as possible but in any case no later than 12.00 noon on 3 April 2024 in respect of Applications for the 2023/2024 tax year and 12.00 noon on 30 April 2024 in respect of Applications for the 2024/2025 tax year.

Cheques should be enclosed with the Application Form unless Application monies have been sent by bank transfer.

If you post your Application Form, you are recommended to use first class post and to allow at least two Business Days for delivery. Applications submitted (in particular with a cheque) should allow for seven Business Days for their funds to clear (in particular in relation to ensuring the Receiving Agent is in receipt of cleared funds prior to 12.00 noon on 3 April 2024 in respect of the 2023/2024 tax year).

Before completing this Application Form you should read the prospectus dated 15 November 2023 (**Prospectus**), in particular the risk factors on pages 10 to 12 the details of the Offer on pages 53 to 56, the Terms and Conditions of Applications on pages 96 to 101 and the Application Procedures on pages 102 to 105. Definitions used in the Prospectus apply herein.

Please ensure you have arranged payment and sent this via cheque or bank transfer at the same time as submitting your Application.

Application Procedure continued

Foresight VCT plc (the Company)

Ordinary shares of 1p each in the Company (Offer Shares).

Cheques

Make payable to 'WCSL FVCT SHARES CLIENT ACC'. (Note: cheques drawn on corporate accounts will not, unless otherwise agreed, be accepted.)

Bank

Account name: WCSL FVCT SHARES CLIENT ACC
Sort code: 80-20-00
Account no: 10434262
Bank: Bank of Scotland
BIC: LOYDGB2L
IBAN: GB64 BOFS 8020 0010 4342 62

Note: please use your initials, surname and postcode (with no gaps) as the payment reference.

The Offer will open on 15 November 2023 and will be closed at 12.00 noon on 30 April 2024 (or earlier if the Offer is fully subscribed or otherwise at the Board's discretion). Please note that the number of Offer Shares to be allotted to a successful Applicant will be determined by applying the Pricing Formula set out on page 55 of the Prospectus. The applicable net asset value per share for the Pricing Formula will be the latest net asset value per Share published by the Company on the day of allotment, adjusted for dividends declared and for which the record date for payment has passed at the time of allotment.

The Promoter (on behalf of the Company) will decide, in its absolute discretion, to accept or reject the Application and you will be notified of the decision.

If you do not receive an acknowledgement of your Application within ten days of sending it to Woodside Corporate Services Limited, please contact the Promoter on 020 3667 8181 or at clientonboarding@foresightgroup.eu.

The Company, the Manager, the Promoter and the Receiving Agent respect your privacy and are committed to protecting your personal information.

If you would like to find out more about how the Company, the Manager, the Promoter and the Receiving Agent use and look after your personal information, please refer to their privacy notices, which can be found at:
<https://www.foresightgroup.eu/privacy-policy/> and
https://woodsidecorporateservices.co.uk/WCSL_Privacy-Policy.pdf

Investor Section

Foresight VCT plc (the Company)

PLEASE NOTE ALL FIELDS MARKED WITH AN ASTERISK ARE MANDATORY

Section 1: Personal Details*

Title*:

Forenames*:

Surname*:

Date of Birth*:

Nationality*:

Country of Birth:

National Insurance No*:

Email:

Tel No:

☐ Please tick this box if you are an existing shareholder in any of the Foresight VCTs.

Occupation (job title and industry):

If retired, previous occupation:

Address*:

Postcode*:

If 3 years or less then please provide previous address:

☐ Please tick this box if you are a Politically Exposed Person (PEP)

☐ Please tick this box if you are a relative or close associate of a PEP and explain below the nature of your relationship:

☐ Please tick this box if you are a US Citizen (as defined on page 94 of the Prospectus)

Where applicable, please provide confirmation of the non-UK jurisdictions in which you are resident for tax purposes, along with your corresponding tax payer identification number (TIN) or equivalent:

Country:

TIN/Equivalent:

Country:

TIN/Equivalent:

Note: the Company, the Manager, the Promoter and the Receiving Agent may, if necessary, disclose information to HMRC and the IRS in order to satisfy their FATCA and/or CRS obligations.

Investor Section continued

Foresight VCT plc (the Company)

PLEASE NOTE ALL FIELDS MARKED WITH AN ASTERISK ARE MANDATORY

Section 2: Nominee/Crest Details

Please **only** complete this section if Offer Shares are to be issued to a nominee (whether in CREST or otherwise).

CREST Participant ID:

Participant Name:

Participant Address:

Postcode:

CREST Member Account ID:

Reference (optional):

Nominee Contact Name:

Nominee Contact Tel No:

Nominee Contact Email:

Section 3: Subscription*

*Application Amount

I offer to subscribe the following amount for Offer Shares in the Company on the Terms and Conditions of Applications as set out in the Prospectus and subject to the articles of association of the Company. Applications must be for a minimum of £3,000. Amounts should include any initial adviser charge to be facilitated if relevant.

Total £:

Tax year 2023/2024 £:

Tax year 2024/2025 £:

☐ I enclose a **cheque or banker's** draft drawn on a UK clearing bank, made payable to: 'WCSL FVCT SHARES CLIENT ACC'.

OR

☐ I have made the above payment by **electronic bank transfer** which I have referenced using my initials, surname and postcode (entered with no gaps).

AND

☐ Please tick this box to confirm that your subscription payment has been made from an account in your name.

OR

☐ Please tick this box to confirm that your subscription has been made from an account other than your own.

Please state below the name, residential address and date of birth of the person from whose account the payment is being made and your relationship to such person. We may be required to request further information in such instances.

*What is the source of your funds?

Please tell us how you acquired the money that you plan to invest, select all that apply.

☐ Earned income¹

☐ Investment proceeds

☐ Inheritance

☐ Sale of property

☐ Gifts²

☐ Other - Please specify

☐ Exit proceeds from another Foresight investment

1. Where you have ticked this box, please provide details of your occupation/industry in the designated space below.
2. Where you have ticked this box, please provide an explanation of who has provided the gift, and why, in the designated space below.

Occupation/industry:

Details of gift:

Investor Section continued

Foresight VCT plc (the Company)

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Section 4: Communication Preferences*

Correspondence preference*

The Company would like to communicate with you electronically in respect of your shareholding in the Company. This means that you will receive notification by email that information/documents have been published and are available on the Company's website.

Please note: if no email address is provided then the Company will make such notifications by post.

Please tick one box only.

☐ **By email** notification (please ensure you have provided your email address in Section 1).

☐ **By post** (hard copies will be posted to you).

Designated Contact (Optional)

If you would like to add a designated contact to your account who can obtain information about your holding on your behalf (other than your financial intermediary), please complete their details below.

Full Name:

Date of Birth:

Relationship:

Email:

Residential Address:

Tel No:

Postcode:

Designated Contact Signature:

Please note: completion of this section allows a Designated Contact to obtain information only about your shareholding on request. No changes can be made to the account nor monies withdrawn by the Designated Contact.

Section 5: Dividends*

Do not complete this section if you wish to participate in the Dividend Reinvestment Scheme or if you have requested that your Offer Shares should be issued to a nominee.

Dividends will be paid directly into your bank account. Existing shareholders should note that further information and instructions relating to the completion of Sections 5 and 6 can be found on pages 103 and 104 of the Prospectus.

Account Name:

Bank/Building Society:

Sort Code:

Account Number:

Bank/Building Society Postcode:

Please tick this box if you wish to withdraw from the Dividend Reinvestment Scheme

☐ If you are an existing participant in the Dividend Reinvestment Scheme and wish to withdraw from the scheme and receive future dividends in cash, please tick this box. Please ensure bank account details are completed above and please do **not** complete Section 6.

Investor Section continued

Foresight VCT plc (the Company)

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Section 6: Dividend Reinvestment Scheme

Please do not complete if you have completed Section 5 or if your shares are to be issued to a nominee.

If you would like to participate in the Dividend Reinvestment Scheme and have dividends reinvested to acquire additional shares in the Company, please tick this box. The full details and terms and conditions relating to the scheme are available at www.foresightvct.com.

By ticking this box you agree to be bound by such terms and conditions.

☐

Section 7: Direct Or Intermediary Applications*

Please tick one of the below:

☐ **Advised Investment**

This is an advised investment with or without an initial adviser charge (please complete Section 8 and ask your financial intermediary to complete Sections 10 to 14).

☐ **Non-Advised Investment**

This is a non-advised investment through a financial intermediary and I have not received financial advice (please do not complete Section 8 and ask your financial intermediary to complete Sections 10 to 14).

☐ **Direct Investment**

This is a direct investment with no financial or other intermediary involved.

Section 8: Adviser Charges

To be completed only by advised investors requesting facilitation of initial adviser charges.

The charging of VAT on an adviser charge is the sole responsibility of the authorised financial adviser. Please provide the total amount/percentage inclusive of VAT below.

Amount³ of the agreed initial up-front adviser charge

(³maximum 4.5% of the total subscription stated in Section 3.)

£:

or %:

Please note: you should be entitled to claim income tax relief on your gross investment. The Company will not facilitate ongoing adviser charges.

Investor Section continued

Foresight VCT plc (the Company)

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Section 9: Signature*

By signing and submitting this Application Form I hereby irrevocably declare that:

- (i) I have read and understood the application procedure contained herein and agree to be bound by the Terms and Conditions of Applications contained on pages 96 to 101 of the Prospectus;
- (ii) if I have requested facilitation of initial adviser charges in Section 8, I am declaring and validating to the Company, the Manager, the Promoter and the Receiving Agent the amount of the facilitation charge(s) specified therein and am agreeing to the making of a facilitation payment of that amount;
- (iii) if my authorised financial intermediary has classified me as an elective Professional Client for the purposes of this Application, I am aware of the risks involved in such classification and of the rights I am giving up and I wish to be treated as a Professional Client in respect of my Application;
- (iv) to the best of my knowledge and belief, the particulars I have given are correct; and
- (v) where I/we have completed this Application Form on behalf of the Applicant, I/we confirm that the Applicant has given me/us the authority to do so.

* Please confirm below whether this Application Form has been signed by or on behalf of the Applicant:

☐ I am the Applicant and have personally signed this Application Form

☐ I am the Applicant's financial intermediary that has completed sections 10 to 14 of this Application Form and the Applicant has given me/us the authority to do so

☐ I am not the Applicant's financial intermediary, but the Applicant has given me/us the authority to do so. I/we will provide the power of attorney or other authority (or a copy duly certified by a solicitor or bank) with my Application Form or otherwise to the Receiving Agent, using the Applicant's initials, surname and postcode (with no gaps) as the reference

Signature of Applicant*:

Print Name*:

Date*:

Financial Intermediary Section

Foresight VCT plc (the Company)

PLEASE NOTE ALL FIELDS MARKED WITH AN ASTERISK ARE MANDATORY

SECTIONS 10 TO 14 TO BE COMPLETED BY THE INVESTOR'S FINANCIAL INTERMEDIARY
(to be completed for every investor except for those ticking the 'Direct Investment' box in Section 7)

Section 10: Financial Intermediaries Details

Firm Name*:

Network Firm Name:

Investment Adviser/Partner*:

Email* (for communication):

Adviser's Email* (if different):

Main point of contact for communication purposes:

Address*:

Tel No*:

Firm FCA Registration No*:

Network Firm FCA
Registration No:

Partner/Adviser FCA Registration No*:

Postcode*:

Adviser/Partner Reference* (if applicable):

Section 11: Financial Intermediary Remuneration

In this section you must elect one of the two options. Please tick either Option 1 OR Option 2 and ensure that this is consistent with Sections 7 and 8 of the Application Form*.

Option 1: Tick this box if you have agreed up-front adviser charges which comply with COBS 6.1A

☐

If you have ticked Option 1 go directly to Section 13

Option 2: Tick this box if you are entitled to receive commission (please read note below)

☐

If you have ticked Option 2 please write in the reason here and complete Section 12

Note: post the Retail Distribution Review (RDR) and MiFID II, only certain advisers with investors who are categorised as 'professional' under FCA Rules or certain execution-only intermediaries remain entitled to receive commission. Post the FCA Policy Statement 13/1, platforms may no longer receive commission whether they follow an advised or an execution only model.

Financial Intermediary Section continued

Foresight VCT plc (the Company)

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Section 12: Commission Waiver Details

Only complete this section if commission selected in Section 11.

Initial commission⁴ may be waived (in whole or part) for the benefit of your client. Please insert the amount of commission you wish to be waived in the box.

% for your client

(⁴Maximum 3% of the total subscription stated in Section 3.)

Section 13: Intermediary Bank Details

Please provide details of your bank or building society account for the payment of charges or commission (as applicable)

Account Name:

Bank/Building Society:

Sort Code:

Account Number:

Email for Commission Statements:

Financial Intermediary Section continued

Foresight VCT plc (the Company)

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Section 14: Financial Intermediary Certificate and Signature

We, the authorised financial intermediary identified in Section 10, confirm that we have applied customer due diligence measures on a risk-sensitive basis in respect of the Applicant to the standard required by the Money Laundering Regulations within the guidance for the UK financial sector issued by the Joint Money Laundering Steering Group and that in the event that the Company, the Manager, the Promoter and/or the Receiving Agent require additional information in order to accept the subscription, we will provide it to them within two Business Days of receiving their request or, if we don't have the information required, arrange for the information to be provided to them.

We, the authorised financial intermediary identified in Section 10, further confirm that, where we have provided advice to the applicant in connection with an investment in the Company, such investment is considered to be a suitable investment for the applicant in their current circumstances.

By signing and submitting this Application Form:

- (i) we confirm that our details included in this Application Form are true and accurate;
- (ii) we make the above confirmation regarding customer due diligence and, where relevant, the above confirmation regarding suitability of the investment;
- (iii) we confirm our acceptance of the Terms and Conditions of Applications on pages 96 to 101 of the Prospectus and The Foresight Group's Terms and Conditions for Financial Intermediaries (which can be accessed at www.foresightgroup.eu/retail-investors/vct);
- (iv) we undertake to notify the Company and/or the Promoter forthwith of any changes to our details provided above and/or if the Applicant ceases to be our client in respect of their investment in the Company;
- (v) where we have completed and signed this Application Form on behalf of the Applicant, we confirm that we are duly authorised by the Applicant to do so (and will provide the power of attorney or a copy thereof duly certified by a solicitor or bank on request); and
- (vi) the individual who has signed the form has the authority to sign this declaration on behalf of the financial intermediary detailed in Section 10.

Signature of Financial Intermediary*:

Print Name*:

Date*:



Foresight VCT plc

The Shard
32 London Bridge Street
London
SE1 9SG

www.foresightvct.com