

To:[Local Authority name]

.....[Local

Authority address] Date: / /20

The Share Foundation

I hereby authorise you to provide to The Share Foundation (registered company number: 4500923 and registered charity number: 1108068, whose registered office is at 1st Floor, Ardenham Court, Oxford Road, Aylesbury, Buckinghamshire HP19 8HT) the following information in relation to myself, the young person named below who is the beneficial owner of a Junior ISA or Child Trust Fund administered by The Share Foundation.

This authorisation shall remain in force until cancelled by me giving you written notice that the authorisation is revoked.

Yours faithfully

Signed:

Full name:	
Date of Birth: / /	E-mail address:
Telephone No.:	Address:
Mobile No.:	
National Insurance No.:	Town:
National Health No.:	County:
Cultural sensitivity: none/ethical/sharia	Postcode:

Note: all information other than full name and date of birth is optional: also, please leave blank any information which is not available.

Countersigned on behalf of the local authority

.....

For Local Authority information

Please countersign this form and forward it to:

The Share Foundation, PO Box 1172, Aylesbury, Bucks HP20 9PG

By countersigning this form you are confirming that The Share Foundation may release information about the Junior ISA or Child Trust Fund to the account beneficiary.