



Please return this completed form to:

State Street Australia Limited
Attention: Unit Registry
Level 14
420 George Street
SYDNEY NSW 2000
Australia
email: ssaltrading@statestreet.com

Additional Application Form

Account number

This additional application form is for existing investors only. New investors please use the Application Form attached to the relevant PDS. Investors should note the times by which applications must be received to be processed on an application day. Please refer to the relevant PDS for further information.

Account name

A Application instructions

Fund Name	Investment date	\$Amount
AQR Wholesale Delta Fund - Class 1F		
AQR Global Risk Premium Trust - Class 1F		
AQR Wholesale Managed Futures Fund - Class 1P		
AQR Style Premia Trust – Class 1P		
Other:		

B Additional application payment method

Please select your payment method by following the payment instructions as contained in the relevant Fund PDS (section G of the relevant PDS application form).

C Declaration and signature

By signing this form, I/we:

- declare that I/we have read and understand the current (and any Supplementary) PDS for the relevant fund(s);
- declare that all details provided in this request form are true and correct and I/we undertake to inform you of any changes to the information supplied as and when they occur;
- (If signing under power of attorney) declare that I/we have not received notice of revocation of that power;
- acknowledge and agree to be bound by the declarations and conditions provided by me/us as outlined in section K of the relevant Application Form;
- acknowledge that investments in the fund(s) are subject to investment risk. For further information on the risks associated with the fund(s) please refer to the relevant PDS.



Investor Type	Who should sign
Individual	where the investment is in one name, the investor must sign
Joint investors	where the investment is in more than one name, all investors must sign
Company	two directors or a director and a company secretary must sign, unless you are a sole director and sole company secretary
Trust	each trustee must sign or, if a corporate trustee, then as for a company
Partnership	each partner
Association or Registered co-operative	each office bearer
Government body	relevant principal officer/authorized signatory
Power of attorney	if signed by the unit holder's attorney, the power of attorney must have been previously been provided. If not a certified copy of the power of attorney as well as a certified copy of the Power of Attorney's driver's license, passport or other photo identification which confirms the name, address and contains their signature must be attached to this form

Signature 1

x

Name

Date

Title

- Investor 1 (individual) Director
- Secretary Sole director & secretary
- Non-corporate trustee Partner
- Other office bearer or attorney (please specify)

Signature 2

x

Name

Date

Title

- Investor 2 (individual) Director
- Secretary Sole director & secretary
- Non-corporate trustee Partner
- Other office bearer or attorney (please specify)