



NEW CENTURY  
PORTFOLIOS

## Account Application

### 1. Registration Complete A, B or C below. (PLEASE PRINT).

#### A. Individual or Joint Account\*

\_\_\_\_\_  
First Name                  Middle Initial                  Last Name                  Social Security Number                  Date Of Birth

\_\_\_\_\_  
First Name                  Middle Initial                  Last Name                  Social Security Number                  Date Of Birth

\*Registration will be Joint Tenancy with Rights of Survivorship, unless otherwise specified.

#### B. Gift to Minors

\_\_\_\_\_  
Name of Custodian                  Social Security Number                  Date of Birth

\_\_\_\_\_  
As Custodian For (name of minor)                  Social Security Number                  Date of Birth

Under the \_\_\_\_\_ UGMA/UTMA  
Minor State of Residence

#### C. Corporations, Partnerships, Trusts and Others\*\*

\*\*Provide a Corporate Resolution with Authorized Signers, if applicable.

\_\_\_\_\_  
Name of Legal Entity                  Taxpayer Identification Number

\_\_\_\_\_  
Name of Fiduciary                  Fiduciary Tax Identification Number

\_\_\_\_\_  
Fiduciary Date of Birth                  Date of Trust (month, day, year)

### 2. Contact Information

Although a P.O. Box may be used as the mailing address for the account, a valid street address must be provided for our records.

\_\_\_\_\_  
Street                                  City                                  State                                  Zip Code

\_\_\_\_\_  
Daytime Telephone

If you have an account in another New Century Portfolio that is registered under the same name as above, please list the

Account number here: \_\_\_\_\_

Email Address: \_\_\_\_\_

NEW CENTURY PORTFOLIOS - CAPITAL • BALANCED • INTERNATIONAL • ALTERNATIVE STRATEGIES • MONEY MARKET

**3. Minimum Investments**

There is a minimum initial investment amount for purchasing shares in each Portfolio. They are as follows:

	<b>Initial</b>	<b>Additional</b>
Regular Accounts	\$1,000	No minimum
UTMA/UGMA	\$1,000	No minimum
IRAs	\$500	No minimum
Automatic Investment Program	\$500	\$50

**4. Investment Information**

- (165) New Century Capital \_\_\_\_\_ % *or* \$ \_\_\_\_\_
  - (166) New Century Balanced \_\_\_\_\_ % *or* \$ \_\_\_\_\_
  - (169) New Century International Portfolio \_\_\_\_\_ % *or* \$ \_\_\_\_\_
  - (170) New Century Alternative Strategies Portfolio \_\_\_\_\_ % *or* \$ \_\_\_\_\_
  - (167) Money Market Cash Reserve Fund \_\_\_\_\_ % *or* \$ \_\_\_\_\_
- Total 100%      Total \$ \_\_\_\_\_

BY CHECK: Please make payable to appropriate Portfolio Name.

BY WIRE: An initial purchase of \$ \_\_\_\_\_ was wired on \_\_\_\_\_ by \_\_\_\_\_  
Date

\_\_\_\_\_ to account # \_\_\_\_\_  
Name of your Bank or Broker      Number assigned by Ultimus

**5. Distribution Options (Reinvestment will occur if no box is checked)**

- Income Dividends (check one box only)       Reinvested       Paid in cash
- Capital Gains Distributions (check one box only)       Reinvested       Paid in cash

**6. Cost Basis Selection**

Cost basis calculation method for all accounts established by this application:

- Average Cost (Default method, if not specified)
- First-In, First-Out (FIFO)\*
- Last-In, First-Out (LIFO)\*
- Highest-Cost, First-Out (HIFO)\*
- Specific Share Identification \*\*

\* If you have any questions, please contact our shareholder services group at 1-888-264-8578 for assistance.

\*\* If Specific Share Identification is selected and no instruction is provided as to which shares should be redeemed, First-In, First-Out (FIFO) will be used.

**7. Check Writing – Money Market Only - Cash Reserve Fund- Prime Series**

To establish free checkwriting privileges, complete this section. There is a \$250 minimum for any check written. Your checkbook will be mailed to you within three to four weeks. Please sign below to indicate the authorized signature(s) for checks written. For a corporate or joint account, please indicate the number of signatures required to sign the checks.

Checks will be ordered upon completion of a Signature Card.

_____	_____	_____
Print Name of Owner, Custodian or Trustee	Signature	Date
_____	_____	_____
Print Name of Joint Owner, Co-Trustee etc.	Signature	Date

How many signatures do you require on checks?     Only one owner     All owners

**8. Systematic Withdrawal Plan**

Systematic Withdrawal Plans are available on accounts with a current market value of \$10,000 or more, and must have dividends reinvested. Please complete a separate form; withdrawals are made on the **25<sup>th</sup>** of each month.

**9. Automatic Investment Plan**

Automatic Investment Plans are available for investments of \$50 or more with a minimum initial investment of \$500. Please complete a separate form; investments are made on the **20<sup>th</sup>** of each month.

**10. The USA PATRIOT Act**

**Important information about procedures for opening a new account or establishing a new relationship.**

To help the U.S. government fight the funding of terrorism and money laundering activities, Federal law under the USA Patriot Act requires all U.S. financial institutions to obtain, verify, and record information that identifies each individual or institution that opens an account.

**What this means:** If the Client enters into a new relationship with New Century Portfolios; we may ask for the Client’s name, address, date of birth (as applicable), and other identification information. This information will be used to verify the Client’s identity. As appropriate, New Century Portfolios may, in its discretion, ask for additional documentation and information. If all required documentation or information is not provided, New Century Portfolios may be unable to open an account or establish a relationship with the Client.

**I certify that I have read and understand the USA PATRIOT Act disclosure.**

**11. Consent to Electronic Access To Documents (optional)**

New Century Portfolios offers electronic access to Quarterly Fund Fact Sheets, Prospectuses, Proxy Statements, Semi-Annual and Annual Reports via the Internet. By completing this section, you choose not to receive these documents by regular mail. You will continue to receive your account statements, confirmations, and tax reporting documents by regular mail.

**Consent:**

I understand that access to both Internet Email and the Internet is required to access documents electronically. I will receive email notification of the availability of a document in electronic format at the email address below. The notification email will not contain the actual document. It will contain a web address (or hyperlink) where the document can be found. By entering this address into my web browser, I can view, download, and print the document from my computer.

I understand that electronic documents will be distributed in Adobe's Portable Document Format (PDF). The Adobe Acrobat Reader software is required to view documents in PDF format. The Reader software is available free of charge from Adobe's web site at [www.adobe.com](http://www.adobe.com). The Reader software must be correctly installed before documents may be viewed in PDF format.

I understand that I must advise you of a change in email address and I may receive a paper copy of any documents delivered electronically if I contact New Century by telephone (888) 639-0102, by fax (781) 237-1635, by email ([newcentury@westonfinancial.net](mailto:newcentury@westonfinancial.net)), or regular mail (New Century Portfolios, 100 William Street, Suite 200, Wellesley, MA 02481).

The documents will be maintained on the web site for a minimum of 12 months from the date of posting. (Specific cancellation dates will be noted on the documents themselves if applicable.)

My consent may be revoked or changed, including any change in electronic mail address to which notifications are delivered, at any time by notifying New Century Portfolios of such change or revocation. I understand that I am not required to consent to electronic access.

**I hereby consent to the electronic access to documents in accordance with my instructions noted.**

E-Mail Address for Electronic Delivery: \_\_\_\_\_

**Check this box to consent to use of email address provided in Part 2**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Further, I am of legal age and have full authority to purchase shares in New Century Portfolios. I have received and read the current Prospectus and agree to its terms. I understand that by signing below, I hereby ratify all instructions given on this account. I agree that neither New Century Portfolios nor Ultimus Fund Solutions, LLC nor their affiliates will be liable for any loss, cost or expense for acting upon such instructions (by telephone or writing) believed by it to be genuine and in accordance with the procedures described in the Prospectus. This order is subject to acceptance by the fund.

**REQUIRED SIGNATURES:**

**The following is required by federal tax law to avoid 20% backup withholding:**

By signing below, I certify under penalties of perjury that the social security or taxpayer identification number entered above is correct or I am waiting for a number to be issued to me and that I have not been notified by the IRS that I am subject to backup withholding unless I have checked the box.

I have been notified by the IRS that I am subject to backup withholding.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date