

Halcon Investment SICAV – Halcon Innovation Fund SUBSCRIPTION FORM (Purchase Order)

PART A – to be retained by the Investor's Bank (Subscription Office)

Details on the Fund	
Name of the Fund	Halcon Investment SICAV
Subfund	Halcon Innovation Fund
Unit Class	Halcon EUR (ISIN: LI1121837424)
Reference Currency	EURO
Fund Type	Alternative Investment Fund (AIF)

Details on the Investor	
First Name and Last Name / Company Name	
Date of Birth / Incorporation	
Subscription Office Client No.	
Payment Debited to Account No.	
IBAN	
SWIFT	
To be booked to Securities Account No.	

Instruction to the Investor's Bank (Subscription Office)

The investor wishes to purchase the following fund units for his/her own account as soon as possible.

Unit Class	Fund Units	Subscription amount and currency
<input type="checkbox"/> Halcon EUR (ISIN: LI1121837424)		
If both fields "Fund Units" and "Subscription amount" are filled in, the specified subscription amount takes precedence.		
Issue Fee	If an issue fee is payable, it will be charged to the investor additionally.	
Type of Subscription	<input type="checkbox"/> Initial Subscription	<input type="checkbox"/> Subsequent Subscription

Instruction from Distribution Partner (optional)

Reference (if applicable)	
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Declarations by the Investor

The Investor hereby declares that, before subscribing, he/she has received and read all the fund documents (in particular, the constituent documents including the investor information according to Art. 105 AIFMG, any key information document (KID), the latest published annual report, any investor notices and other published documents – all available at www.lafv.li) **promptly and in full** and that he/she agrees to the content of the fund documents.

In particular the investor declares the following:

- a) I accept that subscription applications may be deferred or rejected without giving reason;
- b) I have duly noted the conditions on the issue and redemption of fund units specified in the fund documents and agree to those conditions;
- c) I have duly noted the risks and their potential implications on an investment in the fund and hereby accept them;
- d) I have duly noted the sales restrictions stipulated in the fund documents (including those relating to the United States) and hereby confirm that those restrictions are observed;
- e) **At the time this document is signed, I fulfil all the requirements for purchasing fund units as specified in the fund documents and therefore qualify as a professional investor within the meaning of EU Directive 2014/65/EU (MiFID II) or as another eligible investor as defined in the fund documents.**

Place, Date	
Signature of the Investor	

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PART B – to be forwarded to the Depository Bank of the Fund (wertschriften@kaiserpartner.com)

Details on the Fund	
Name of the Fund	Halcon Investment SICAV
Subfund	Halcon Innovation Fund
Fund Type	Alternative Investment Fund (AIF)
Unit Class	Halcon EUR (ISIN: LI1121837424)
Reference Currency	EURO

Details on the Depository Bank of the Fund	
Company Name	Kaiser Partner Privatbank AG
Department	Depository & Security Issuer Services
Address	Herrengasse 23, 9490 Vaduz, Liechtenstein
email	wertschriften@kaiserpartner.com
Telephone Number / FAX	+423 237 84 07

Details on the Investor's Bank (Subscription Office)	
Company Name	
Contact Person	
Department	
Address	
email	
Telephone Number / FAX	
Settlement information (for delivery versus payment (DVP) with SIX SIS AG (INSECHZZXXX) as place of settlement (PSET))	

Instruction to the Depository of the Fund

The investor wishes to purchase the following fund units for his/her own account as soon as possible.

Unit Class	Fund Units	Subscription amount and currency
<input type="checkbox"/> Halcon EUR (ISIN: LI1121837424)		
If both fields "Fund Units" and "Subscription amount" are filled in, the specified subscription amount takes precedence.		
Issue Fee	If an issue fee is payable, it will be charged to the investor additionally.	
Subscription	<input type="checkbox"/> Initial subscription	<input type="checkbox"/> Subsequent subscription
Instruction from Distribution Partner Reference (if applicable)		

The Investor's Bank (Subscription Office) hereby declares that

- the conditions on the minimum subscription amounts as stipulated in the fund documents are fulfilled;
- it is in possession of a duly signed subscription form (Part A in the original);
- the investor is a professional investor within the meaning of EU Directive 2014/65/EU (MiFID II) or is another eligible investor as defined in the Fund documents and that the subscription office has verified this.**

Place, Date	
Signature of the Investor's Bank (Subscription Office)	

Please forward Part B of this subscription form to the Depository Bank of the Fund (email: wertschriften@kaiserpartner.com). Part A is to be retained by the Investor's Bank (Subscription Office).