

First Eagle Funds

Coverdell Education Savings Custodial Account

Adoption Agreement *(effective January 2008)*

The undersigned, by signing this Adoption Agreement, hereby establishes an Education Savings Account (the "Account") for the benefit of the Student with State Street Bank and Trust Company as Custodian ("Bank"). The terms of the Account are contained in the document entitled "State Street Bank and Trust Company Coverdell Education Savings Custodial Account Agreement" (which is incorporated by reference) and this Adoption Agreement. The Account will be effective upon acceptance by State Street Bank and Trust. To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. When you open an account, you will be required to provide your name, address, date of birth and other information that will allow us to identify you. All required sections must be completed, if not, we will be unable to open your account. Please call us at 1-800-334-2143 with any questions.

1. Student Information (All required information must be provided in accordance with industry regulations. If it is not provided, we will be unable to open your account. A P.O. Box is not acceptable. We cannot establish an account unless you provide at least one telephone number where you can be reached.)

Print Full Name of Student

Student's Social Security Number

Address

Student's Daytime Telephone Number

City

State

Zip

Student's Date of Birth

Student is a Special Needs Student

2. Parent Information (Only one Parent should be listed. All mailings will be sent to the parent's address.)

Mother Father Guardian*
*If "guardian," submit proof of guardianship.

Print Full Name of Parent

Parent's Social Security Number

Address

Parent's Daytime Telephone Number

City

State

Zip

Parent's Date of Birth

Note: The "Parent" is the same individual described as the "Responsible Individual" in Articles I - X of the Custodial Account Agreement, as the "RI" on all account registration materials and as the "Parent" in Article XI of the Custodial Account Agreement and the Disclosure Statement.

3. Donor Information

Print Full Name of Donor

Donor's Social Security Number

Address

Name of Corporate Entity Contact

City

State

Zip

Donor's Daytime Telephone Number

If the person designated as primary beneficiary does not survive the Student, the Account will pass to the alternate beneficiary (if any) named below if he or she survives the Student. If no designated beneficiary survives the Student, the Account will pass to the Student's estate (unless otherwise required under the laws of the state of the Student's residence). If you wish to designate multiple primary or alternate beneficiaries, you may do so by attaching a separate sheet listing the required information about each designated beneficiary; distributions to them will be in equal shares unless you specify different proportions.

Primary Beneficiary

Name	Relationship to Student	Date of Birth	Social Security Number
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Alternate Beneficiary

Name	Relationship to Student	Date of Birth	Social Security Number
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8. Information and Certifications Concerning Tax Withholding

By signing this form, the undersigned certifies that the Student is a U.S. Person (a U.S. citizen or a resident alien) or a Foreign Person (a non-resident alien), as indicated by checking the appropriate box below, and makes the related certifications.

The Student is (check one)

- A U.S. Person. The undersigned certifies that the number shown in Part 1 of this Adoption Agreement is the Student's correct Social Security number (or the Student is waiting to be issued a Social Security number); and

The Student is not subject to backup withholding because: (a) the Student is exempt from backup withholding, or (b) the Student has not been notified by the Internal Revenue Service (IRS) that the Student is subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified the Student that the Student is no longer subject to backup withholding. (NOTE: Cross out this sentence if the Student has been notified by the IRS that the Student is currently subject to backup withholding because of failure to report all interest and dividends on the Student's tax return.)

- A Foreign Person. The undersigned acknowledges that the IRS does not require consent to any provisions of this document other than the Form W-8BEN certification required to avoid backup withholding and qualify for a tax treaty rate of withholding (see IRS Publication 515).

9. Certifications and Signatures

If this is a Rollover Education Savings Account, the undersigned certifies that any assets transferred in kind are the same assets received in the distribution being rolled over; that no other rollover from the transferring Education Savings Account has been made within the one-year period immediately preceding this rollover, and further that the assets being rolled over into this Account were not previously rolled over into the transferring Education Savings Account within the one-year period immediately preceding this rollover; that such distribution was received within 60 days of making the rollover to this Account; and that the Student identified in Item 1 above is either the person for whose benefit the prior Education Savings Account was maintained or a member of such person's family (within the meaning of Internal Revenue Code Section 529(e)(2)).

If this is an Annual Contribution Education Savings Account, the undersigned certifies that the Student is less than 18 years old or is a Special Needs Student and that all Contributions made on Student's behalf to this or any other Education Savings Accounts do not exceed \$2,000 in a single tax year. If this is a Transfer or Rollover of an existing Education Savings Account, the undersigned certifies that the Student is less than 30 years old or is a Special Needs Student and that the relationship indicated in Section 4 is correct.

The undersigned acknowledges having received and read the "Education Savings Account Disclosure Statement" relating to this Account (including the Custodian's fee schedule), the Coverdell Education Savings Custodial Account Agreement, and the "Instructions" pertaining to this Adoption Agreement.

The undersigned acknowledges receipt of the Custodial Account Agreement and Education Savings Account Disclosure Statement at least 7 days before the date of signature (as indicated below) and acknowledges that there is no further right of revocation.

If this is a contribution from a corporate entity, the undersigned represents that he/she has the requisite authority to sign this Adoption Agreement on behalf of such entity and that the establishment of the Account and contribution thereto have been duly approved by all requisite corporate actions.

The undersigned acknowledges that adverse income tax consequences (including possible penalties) may apply for providing false or incorrect information and certifies that the information provided above is accurate and correct.

The undersigned also certifies that he/she is not involved in any money laundering schemes and the source of this investment is not derived from any unlawful or criminal activities.

Signature of Student Date
(If Student has attained the age of majority in his/her state of residence.)

Signature of Guardian, Parent, Responsible Individual Date
(or Representative of Corporate Entity)

Custodian Acceptance. State Street Bank and Trust Company will accept appointment as Custodian of the Account. However, this Agreement is not binding upon the Custodian until the Student has received a statement of the transaction. Receipt by the Student of a confirmation of the purchase of the Fund shares indicated above will serve as notification of State Street Bank and Trust Company acceptance of appointment as Custodian of the Account.

State Street Bank and Trust Company, CUSTODIAN

If Student is a minor under the laws of Student's state of residence, acceptance by the Custodian of the contribution to this Account is expressly conditioned upon the agreement of the Parent (identified above in Section 2) to be responsible for all requirements of the Student under the doc-

uments governing the Account, and to exercise the powers and duties of the Student, with respect to the operation of the Account. Upon reaching the age of majority in the state in which the Student then resides, the Student may advise the Custodian in writing (accompanied by such supporting documentation as the Custodian may require) that he or she is assuming sole responsibility to exercise all powers and duties associated with the administration of the Account. Absent such written notice by Student, Custodian shall have no responsibility to acknowledge Student's exercise of such powers and duties of administration.

10. Dealer Information (Complete only if applicable.)

Dealer Name	Dealer Number	Branch Number
Branch Address (to receive statements)		
City	State	Zip Code
Representative Name	Representative Number	Telephone Number

11. Electronic Delivery

By selecting the item(s) below and supplying your e-mail address, you are expressing interest in receiving these documents online instead of in paper format by regular mail. Once your account statements are available, you will receive an email prompting you to login our website (if preferred, you may login our website at www.firsteaglefunds.com and immediately gain access to your account and set up electronic delivery.)

Account Statement Annual/Semiannual Reports and Prospectuses

E-Mail Address

12. Interested Party (To receive duplicate statements.)

Name		
Address		
City	State	Zip Code

13. Mail the completed form to: (Please retain a photocopy of the completed application for your records.)

Regular Mail:
First Eagle Funds
P.O. Box 219324
Kansas City, MO 64121-9324

Overnight Mail:
First Eagle Funds
330 West 9th Street
Kansas City, MO 64105

Make checks payable to "First Eagle Funds."
Third-party checks, starter checks and cash equivalents (such as travelers checks, cashier checks and money orders) cannot be accepted to purchase shares.

