RIVERPARK FUNDS

Account Maintenance Form **For Assistance Call: 1-888-564-4517**

Please complete the applicable sections and mail to the address at the end of this form.

This form may be used to adopt any of the options indicated below for existing Accounts only. Complete section 1 and 6 for all options that you would like to apply to you account(s). Please refer to the RiverPark Funds prospectus for additional information on Account options and privileges. Our prospectus can be found online at www.riverparkfunds.com.

What would you like to do?

- ❒ Change Address/Phone/Email (Sections 1, 2 and 6)
- ❒ Change Dividend/Capital Gain Distribution Options (Sections 1, 3 and 8)
- ❒ Establish or Change Telephone Options (Sections 1, 4 and 8)
- ❒ Authorize Systematic Investment Plan (SIP) (Sections 1, 5, 7 and 8)
- ❒ Authorize Systematic Withdrawal (SWP) (Sections 1, 6 and 8)
- ❒ Change/Update Bank Information (Sections 1, 7 and 8, Signature Guarantee Required)

1 CURRENT ACCOUNT INFORMATION

Please print or type clearly.

Account Owner's Name _____ Joint Account Owner's Name (if applicable) _____

Address of Record _____ City _____ State _____ Zip _____

Daytime Telephone _____ Evening Telephone _____

Email Address _____

Account Number(s) _____

2 CHANGE ADDRESS/ PHONE/EMAIL

New Address: Street _____ City _____ State _____ Zip _____

New Daytime Telephone _____ New Evening Telephone _____

New Email Address _____

3 DIVIDEND/CAPITAL GAIN DISTRIBUTION OPTIONS

Please update my dividend and/or capital gain options as follows:

- ❒ Reinvest dividends and capital gains
- ❒ Reinvest dividends and pay capital gains in cash
- ❒ Pay dividends and capital gains in cash
- ❒ Pay dividends in cash and reinvest capital gains

Please select one of the following if you have checked any option for a cash distribution:

- ❒ Send a check to the address on the Account
- ❒ Send via ACH to the bank listed on the Account. (Please see Section 7 to add or update banking information.)

4 TELEPHONE OPTIONS

Please select the option(s) you would like added or discontinued. If establishing an option that requires bank instructions to be updated or added to your Account, please see Section 5.

- ❒ I wish to establish the ability to make telephone/online purchases/exchanges (Bank instructions required).
- ❒ I wish to establish the ability to make telephone redemptions (Bank instructions and Signature Guarantee required).
- ❒ I wish to discontinue the ability to make telephone purchases/exchanges.
- ❒ I wish to discontinue the ability to make telephone redemptions.

Redemption Options:

- ❒ Send a check to the address listed on the Account(s)
- ❒ Send proceeds via ACH or wire to the bank listed on the Account(s). (Please see Section 7 to add or update banking information.)

  ACH requires up to three business days, at no charge. Wire may be subject to an additional charge of $10, deducted directly from the redemption proceeds.

5 SYSTEMATIC INVESTMENT PLAN (SIP)

I (We) hereby authorize and direct the agent to draw on my (our) bank account on a periodic basis, as indicated in section 9, for investment in my (our) account. Attached is a voided check of the bank account I (We) wish to use. (Initial investments may not be made through the Systematic Investment Plan). Please note this service will be effective 15 days after the RiverPark Funds receive this application. **Your bank account will be debited on the 25th of the month.**

Preferred Investment Schedule:

❍ Monthly ❍ Quarterly ❍ Semi-Annually ❍ Annually

BEGIN INVESTMENT ON (ENTER MONTH/YEAR) _____

Debit My (Our) Bank Account and Invest as Follows ($50 Minimum):

RiverPark/Next Century Large Growth Fund $ _____ AMOUNT

RiverPark/Next Century Growth Fund: $ _____ AMOUNT

RiverPark Large Growth Fund: $ _____ AMOUNT

Wedgewood Fund: $ _____ AMOUNT

RiverPark Short Term High Yield Fund: $ _____ AMOUNT

RiverPark Long/Short Opportunity Fund: $ _____ AMOUNT

RiverPark Floating Rate CMBS Fund: $ _____ AMOUNT

RETAIN A PHOTOCOPY OF THIS COMPLETED FORM FOR YOUR RECORDS

Please be sure to complete the other side of this form.

Account Maintenance Form

6 SYSTEMATIC WITHDRAWAL PLAN (SWP)

An account balance of at least $10,000 is required.

Your withdrawal will occur on the 25th of the month:

❍ Monthly ❍ Quarterly ❍ Semi-Annually ❍ Annually

BEGIN WITHDRAWAL ON (ENTER MONTH/YEAR)

Preferred Payment Method:

❍ By Check ❍ Direct Deposit to your Bank (ACH) (Complete Section 9)

I (We) Elect to Receive a Periodic Payment of ($75 Minimum):

RiverPark/Next Century Large Growth Fund $ _____ AMOUNT

RiverPark/Next Century Growth Fund: $ _____ AMOUNT

RiverPark Large Growth Fund: $ _____ AMOUNT

Wedgewood Fund: $ _____ AMOUNT

RiverPark Short Term High Yield Fund: $ _____ AMOUNT

RiverPark Long/Short Opportunity Fund: $ _____ AMOUNT

RiverPark Floating Rate CMBS Fund: $ _____ AMOUNT

7 BANK INFORMATION

Bank information is required for bank wires, ACH transactions and Automatic Investment Plans. Please attach a pre-printed voided check or deposit slip and **provide a Signature Guarantee in Section 8.**

RiverPark Funds is hereby authorized to credit my/our Account by electronically debiting my/our bank account. This authority is to remain in effect until notice has been received by RiverPark Funds that it has been revoked. RiverPark Funds shall be fully protected in honoring such debit and if such debit is dishonored, whether with or without cause, whether intentionally or inadvertently, RiverPark Funds shall be under no liability whatsoever.

Attach Voided Check Here

❒ Checking ❒ Savings

Bank Name City State

Bank Routing Number Account Number

Name(s) on Account

8 SIGNATURES AND AUTHORIZATION

In order to complete your request, the required authorized signers must sign below exactly as their names appear on the Account. A signature guarantee will be required **ONLY** if you are changing your name, adding/changing bank instructions or adding your Phone Options.

A **Signature Guarantee** assures that a signature is genuine and protects investors from unauthorized requests. A Signature Guarantee may be obtained from an officer of a commercial bank or trust company, savings and loan or savings bank, or a member firm of a domestic stock exchange. Notarization by a notary public is **NOT** acceptable.

By signing below, the owner(s) of the above referenced Account(s) hereby authorize(s) the option(s) specified in this form.

Account Owner's Signature and Date

Affix Signature Guarantee stamp.

Joint Account Owner's Signature and Date

Affix Signature Guarantee stamp.

Return the completed form to the address below:

Send to:
RiverPark Funds
P.O. Box 219008
Kansas City, MO 64121-9008

For overnight packages:
RiverPark Funds
c/o SS&C GIDS, Inc.
801 Pennsylvania Ave
Suite 219008
Kansas City, MO 64105-1307

If you have any questions or to ensure that all legal requirements are met, please call Shareholder Services at 1-888-564-4517.