**NEW ACCOUNT ENROLLMENT FORM**

**MAILING ADDRESS**
500 S BUENA VISTA ST MC 9722
BURBANK CA 91521-9722

**TELEPHONE NUMBER**
(818) 553-7200

**FAX NUMBER**
(818) 553-7210

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**ENROLLMENT OPTIONS**

- Enclosed is my check/money order for $[ ] ($250 minimum) made payable to Disney Investment Plan. An enrollment fee of $10, plus a $5 investment fee will be deducted from this amount prior to investment.

- I [we] authorize monthly deductions of $50 or more from my [our] U.S. financial institution. Please enclosed a $10 check/money order made payable to Disney Investment Plan in satisfaction of the enrollment fee and complete the Automatic Deduction Authorization located on the reverse. An investment fee of $1 will be deducted from each automatic deduction.

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**ACCOUNT REGISTRATION**

- **INDIVIDUAL/JOINT ACCOUNT**
  - NAME
  - JOINT OWNER (IF ANY)
  - DATE OF BIRTH

- **CUSTODIAL ACCOUNT**
  - CUSTODIAN'S NAME
  - MINOR'S NAME
  - MINOR'S STATE OF RESIDENCE
  - DATE OF BIRTH

- **TRUST ACCOUNT**
  - TRUSTEE(S) NAME
  - NAME OF TRUST
  - DATE OF TRUST
  - DATE OF BIRTH

- **OTHER**
  - OTHER

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**OTHER INFORMATION**

- Address
- City
- State
- Zip
- Social Security/Employer Identification Number
  (For a Custodial Account, please provide minor's Social Security number. For a Trust Account please provide Employer ID number)

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**AUTHORIZATION AND CERTIFICATION**

I [we] understand and agree to the terms and conditions of The Walt Disney Company Investment Plan and hereby authorize Disney Shareholder Services to act as administrator on my [our] behalf pursuant to the plan. Under penalties of perjury, I certify that the Social Security/Employer Identification Number indicated above is true and correct and that I am not subject to back-up withholding per the Internal Revenue Code. Please note that if a Social Security/Employer Identification Number is not provided, back-up withholding tax will be withheld on dividend and sale payments.

**LEGAL SIGNATURE(S) AS NAME(S) APPEAR(S) ABOVE. (IF JOINT ACCOUNT, ALL PERSONS MUST SIGN; IF CUSTODIAL, REGISTERED CUSTODIAN)**

1. 
2. 

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For Office Use Only

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INSTRUCTIONS:

Please complete the financial institution section below.

Funds cannot be deducted from a brokerage, mutual fund, money market or foreign account.

The name of at least one registered shareholder must appear on the bank account. Funds cannot be deducted from third-party accounts.

All registered shareholders must sign the form.

For checking or savings accounts at Savings & Loans, Trust Banks, Credit Unions and Federal Savings Banks, checks and deposit tickets do not always contain the correct information for automatic deduction. Please have a representative from your financial institution complete the financial institution information section of this form.

Funds will be deducted on the 15th of each month on the first business day thereafter.

FINANCIAL INSTITUTION INFORMATION

Name and Address of Bank or Other Financial Institution: 

__________________________________________________________

__________________________________________________________

__________________________________________________________

Name on Bank Account: ______________________________________

Account Type (Checking or Savings): ___________________________

Monthly Investment Amount: $ ________________________________ $00 ($50 minimum)

Bank Representative: _________________________________________

Please enclose a copy of a voided check or a savings deposit slip to verify banking information.

AUTHORIZATION:

I/we hereby authorize Disney Shareholder Services to make automatic monthly deductions from my(our) checking/savings account at a U.S. financial institution on the 15th of each month, or the first business day thereafter, in the amount indicated to invest in shares of Disney common stock pursuant of the terms of The Walt Disney Company Investment Plan.

LEGAL SIGNATURE(S) (IF Joint ACCOUNT, ALL PERSONS MUST SIGN; IF CUSTODIAL, REGISTERED CUSTODIAN)

1. ________________________________________________________ 2. ________________________________________________________