



AZZAD FUNDS

Please return form to:
Azzad Funds
C/O Mutual Shareholder Services
8000 Town Centre Dr. Ste 400
Broadview Heights, OH 44147
Make Checks payable to: Azzad Funds

Transfer Form for IRAs

Use this form to transfer from an existing IRA with another firm to an IRA with the Azzad Funds. **Please send with a recent copy of the account statement you are transferring to us. If this is a roll over from an employer plan, do not use this form. You must contact your plan administrator to ensure that you have completed any documents they may require.** The prompt transfer of your assets is your responsibility. For assistance completing this form, please call toll free 888-862-9923.

1. TRANSFER ACCOUNT REGISTRATION

To transfer your IRA, we need to know how it is registered with your current custodian. Complete a separate form for each account being transferred. Please print clearly.

Full Name (First, middle, last) Social Security Number Date of Birth (MM-DD-YYYY)

Street Address Apt, Floor, Room No.

City State Zip

Mailing Address (If different from street address) Apt, Floor, Room No. City State Zip Code

Daytime Phone Evening Telephone Number Email Address

2. CURRENT TRUSTEE OR CUSTODIAN INFORMATION

Please attach a copy of a recent account statement. If you are age 70 1/2 or older, please contact your current custodian to satisfy this year's required minimum distribution before your transfer is made (not applicable for transfers from a Roth IRA).

Current Custodian

Trustee, custodian or Insurance Company

Street Address Floor, Room No, Suite Business Phone Number

City State Zip

Account Information

Name of Account Owner (First, Middle, Last) Account Number

Name of Mutual Fund, brokerage firm, or bank in which your IRA is invested

Type of Account (Circle one): _____ Traditional IRA _____ SEP IRA _____ ROTH IRA _____ Rollover IRA

Other, please specify: _____

3. TRANSFER INSTRUCTIONS & AUTHORIZATION

To Resigning Trustee/Custodian: Please transfer my account in accordance with the instructions on this application. Please check one:

I wish to liquidate/surrender my entire balance in the account indicated in Section 2. **OR**

I wish to liquidate/surrender a portion of my IRA balance. \$ _____ in the account indicated in Section 2.

Please transfer: (check one below)

Immediately *Note: Some institutions may charge a penalty for early withdrawal.* **OR**

At maturity date (specify date, if applicable _____). *Note: A penalty may apply for early withdrawals from certain investments, such as CDs and annuities.*

4. INSTRUCTIONS TO RESIGNING CUSTODIAN/TRANSFER AGENT

Please liquidate the ACCOUNT HOLDER'S ACCOUNT, as specified above. Issue a check payable to **Azzad Funds, FBO (Investor Name) IRA** and mail along with any other instructions to: Azzad Funds c/o Mutual Shareholder Services 8000 Town Centre Dr. Ste 400 Broadview Heights, OH 44147.

5. AZZAD FUNDS INVESTMENT INSTRUCTIONS

A. Check one:

I am opening a new account and have attached an Azzad Funds Individual Retirement Application.

Deposit the proceeds into my existing Azzad Funds IRA, please indicate your Account Number: _____

B. Indicate the type of transfer or direct rollover you are processing:

Traditional IRA

Roth Conversion IRA

Roth IRA

Qualified Retirement Plan (Contact employer for additional paperwork)

Rollover IRA

SIMPLE IRA

SEP IRA

Other: _____

C. Please purchase shares of the following funds:

Azzad Ethical Fund (ADJEX) \$ _____ or _____ %

Azzad Wise Capital Fund (WISEX) \$ _____ or _____ %

6. SIGNATURES (REQUIRED)

I certify that I have established a IRA with the Azzad Funds, of which Huntington National Bank is the transferee custodian/trustee. I certify that the information contained on this form is true and correct. I direct the transferor custodian/trustee to transfer my IRA assets as set forth in this form. I understand that I should seek the guidance of a tax or legal professional with regard to this decision. I understand that if I establish a separate conduit account, it is my responsibility to keep my conduit account separate from my other accounts. I understand that my custodian/trustee cannot provide legal advice. I indemnify and agree to hold the Azzad Funds and its agents harmless against any liabilities. I assume full responsibility for the consequences of this transfer decision.

I certify that I have received and read the custodial and disclosure agreements for IRAs, which are incorporate herein by reference. I understand that the requirements for a valid transfer to a Traditional IRA, SEP IRA or Roth IRA are complex and I have the responsibility for complying with all requirements and for the tax implications of any such transfer. I acknowledge that I have sole responsibility for my investment choices and that I have received a current prospectus for each Fund I select.

Signature of IRA Owner

Date

The custodian/trustee agrees to accept these funds as a transfer. Mutual Shareholder Services on behalf of Huntington National Bank agrees to accept the transfer described herein to an Azzad Funds IRA.

X _____
/S/ Greg Getts

Date

MEDALLION SIGNATURE GUARANTEE: Your current custodian may require a medallion signature guarantee in order to process the transfer. Please check with your custodian and obtain a medallion signature guarantee if necessary. A Medallion Signature Guarantee may be obtained from a bank, credit union, or brokerage firm (called the guarantor). A notary public cannot provide a Medallion Signature Guarantee. The guarantor assumes financial liability for the authenticity of the signature. Note: A Notary Public stamp or seal is different from a medallion signature guarantee and is not sufficient.

Name of Bank or Firm Providing Signature Guarantee

Authorized Signature and Stamp

Date