



Fill in the details below in BLOCK CAPITALS. It is important that before signing you carefully read the CASTOR INTERNATIONAL 2025 brochure and the Terms and Conditions accompanying this agreement.

This agreement is between:

ull name		Post Code	
lome addre	SS		
National Ins	urance Number	Account Number (as shown on your invitation le	++~r)
		Account Namber (as shown on your invitation ie	etter)
	The Company	The Trustee	
	The Company VINCI S.A.	The Trustee Equiniti Share Plan Trustees Limited	
	The Company VINCI S.A. 1973 bd de la Défense	The Trustee Equiniti Share Plan Trustees Limited Aspect House	
	The Company VINCI S.A. 1973 bd de la Défense 92000 Nanterre	The Trustee Equiniti Share Plan Trustees Limited Aspect House Spencer Road	
	The Company VINCI S.A. 1973 bd de la Défense	The Trustee Equiniti Share Plan Trustees Limited Aspect House	

This agreement sets out the terms on which you agree to participate and acquire Partnership with Matching Shares subject to the terms and conditions and rules of the Plan. One Matching Share will be awarded for each Partnership Share purchased using deductions from your pay up to a limit of £1,500. No Matching Shares will be awarded for Partnership Share purchases from £1,500 to £1,800. To participate in the Plan this agreement must be completed and returned to Equiniti Limited, whose address is given below. The definitions in the Plan Rules apply to this agreement. If there is any conflict between a) this agreement and its accompanying terms and conditions and b) the Trust Deed and Rules of the Plan, the Trust Deed and Rules will prevail.

April to October 2025

For the 7 months from April to October 2025 you may invest up to £1,800 (or 10% of your gross pay for the tax year beginning 6 April 2025 if lower). If you decide to spread the payments equally over 7 months you would need to invest £257.14 per month (£60 per week) if you wanted to invest the maximum amount. If you wish to invest over a shorter period enter the amount you wish to be deducted from your pay until £1,800 is reached. **The subscription period opens on 2** March and closes on **20** September **2025**.

3 March and closes on 30 September 2025.

You may change the amount at any time by contacting the Plan Administrator, Equiniti Limited.



I agree to my employer deducting the following amounts from my pay.

PLEASE CHOOSE OPTION 1 OR 2 AND COMPLETE ONE BOX ONLY.

(if weekly paid). I accept that the following amount wil	hly deduction from your pay, complete Box 1 (if monthly paid) or Box 2 I be deducted from my pay for the period April to October 2025 (up to a maximum of
£1,800). Box 1 Per month (£)	Box 2 Per week (£)
(The amount should not be less than a 6 April 2025).	£10 per deduction and not exceed 10% of your gross pay for the tax year beginning
OPTION 2.	
in the box below.	n deduction taken from your pay, enter the amount you would like deducted be deducted from my next available pay (the earliest deduction possible is April 2025).
	n £1,800 or exceed 10% of your gross pay for the tax year beginning 6 April 2025. Four pay as a one-off deduction in the next available pay period).
nave read and agree to be bound by the	Terms and Conditions and the Rules of the Plan
gnature:	Date
el No (daytime):	Email address:

Upon completion, please return this agreement, to arrive no later than 30 September 2025, to

Equiniti Limited, Aspect House, Spencer Road, Lancing, West Sussex, BN99 6DA.

You may wish to keep a copy for your own records.

Equiniti Employee Helpline: +44 (0) 371 384 2956. Lines are open 8.30am to 5.30pm Monday to Friday, excluding Public Holidays in England & Wales

For deaf and speech impaired customers Equiniti welcome calls via Relay UK. Please see www.relayuk.bt.com for more information. You can also contact Equiniti by using the email service myshareplan@equiniti.com. Please provide your Company name in the subject line. Please contact Equiniti to request this document in an alternative format, for example large print, Braille or audio.