

# Section 1 About me

### Part 1 Personal details

Title:	Mr Mrs Miss Dr Prof Lord
First name:	
Last name:	
Date of birth: DD/MM/YYYY	
Country of residence:	
Are you a US citizen and/or a tax resident anywhere other than United Kingdom?	Yes No
Part 2 Account type	
What account would you like to apply for?	CFD Spread Bet Both
Part 3 Contact details	
Primary contact number	
Alternative contact number	
Email	
Part 4 Identity details	
Identification type	Driving License Passport MRZ
Identification reference number Please attach a copy of your identification to this application when you return to us	



# Section 1 About me

### Part 5 Home address

Building/House number						
Street/Road						
Town/City						
Postcode						
Country						
Time at current address		n 6 months		ore than 6 n		
Section 2 Trading experience			ious address at the end for less than 6 month:		f you have	
Part 1 My trading experience						
Have you ever worked for a financially regulated company?	Yes	No				
If yes, please provide details						
Have you been in a professional position for at least one year which requires knowledge of derivatives?	Yes	No				
If yes, please provide details and in what capacity?						
Have you been an approved person?	Yes	No				
Do you have a good knowledge of derivative products?	Yes	No				
If so, please provide details and where the knowledge was gained, including any qualifications?						
How do you make your investment decisions?	Yourself		Professiona adviser		Combination	



Have you traded in the following products in the last two years?	CFD	Spread Bet	FX	Options
In relation to the products, please provide any further information regarding the types of transactions you have undertaken.				
Average number of trades in the last quarter	CFD	Spread Bet	FX	Options
Average trade size	CFD	Spread Bet	FX	Options
What is the size of your financial instrument portfolio, defined as cash deposits and financial instruments?				
Part 2 Employment details				
Your employment status	Employed	Self Employed		
	Unemployed	Student	Othe	er
Name of employer				
Is your employer FSA regulated?	Yes No	0		
Compliance Officer email				
Part 3 Financial details				
Approximate annual income (£)	<50k) (50 100	) Ok >100k		
Approximate value of assets, savings and investments (£)	<500k (500 1r	0- n >1m		
Source of your funds	Savings	Salary Saving	g & Salaries	Other O
Your trading currency/ies	(GBP) (US	D EUR JPY	CHF	
User name:				

Please do not begin your password with a symbol or number. Use more than 3 characters. & @ / | \ cannot be used.



# **Section 3** Declaration

We will rely upon our Terms and Conditions along with the content of the Risk Warning and Order Execution Policy. For your own benefit and protection you should read each of these carefully before signing on each of the lines below. If you do not understand any point please ask for further information.					
I have read, understand and agree to the Terms & Conditions	Signed	Dated			
I have read, understand and agree to the Risk Warning	Signed	Dated			
I have read and understand the Order Execution Policy	Signed	Dated			
Where did you hear about us?					
art 4 Disclaimer					
Spread betting and CFD trading both carry a high level of risk to your capital with the possibility of losing more than your initial investment. These products may not be suitable for all investors, and are only intended for people over 18. Please ensure that you are fully aware of the risks involved and, if necessary, seek independent financial advice.					
Details of your previous address if you have been living at your current address for less than 6 months.					
Building/House number					
Street/Road					
Town/City					
Postcode					
Country					