

CAUFEX EXCHANGE  
MEMBERSHIP  
APPLICATION**CONSENT TO CONDUCT BUSINESS ELECTRONICALLY**

- 1. Applying Electronically.** If you decide to apply to establish a Trading Account with JSC CAUFEX, you agree to receive a Trader Account Letter, Risk Disclosure, Transaction Disclosure, and Trader Agreement.
- 2. Electronic Communications.** Trader Account Letter, Risk Disclosure, Transaction Disclosure, Trader Agreement, and any notices, instructions, agreements, or any other communications regarding Transactions and your Account (all of which are referred to herein as the "Communications") may be presented, delivered, stored, retrieved, and transmitted electronically.
- 3. Executing Transactions Electronically.** The Transactions, Agreements, Records and Signatures can be executed in electronic form.
- 4. Consenting to Do Business Electronically.** The decision whether to do business electronically is yours, and you should consider whether you have the necessary hardware and software capabilities. Your consent to do business electronically, and our agreement to do so, only applies to the establishment and maintenance of your Account and the execution of Transactions in connection with your Account.
- 5. Withdrawal of Consent.** You have the right to withdraw your consent to doing business electronically at any time. However, if you withdraw such consent, any Communications or Transactions between us during the period after your consent to doing business electronically, and before your withdrawal of such consent, will be valid and binding on all parties.
- 6. Changes to Your Contact Information.** You should keep us informed of any change in your electronic or mailing address or other contact information.
- 7. Printing.** You may print this document by selecting Print from the File menu.
- 8. Your Ability to Access Communications.** When you sign this document below, you acknowledge that you have the capability to access the Communications.
- 9. Consent to Electronic Communications.** When you sign this document below, you consent to having all Communications provided or made available to you in electronic form.
- 10. Consent to Executing Transactions Electronically.** When you sign this document below, you consent to executing the Transactions, Agreements, Records and Signatures electronically.

❖ **The undersigned have read and understood the foregoing Consent to Conduct Business Electronically. The undersigned agrees to be bound by all of the terms and conditions hereof.**

**FULL NAME:** [Click here to enter text](#)  
**CITEZNSHIP:** [Click here to enter text](#)  
**ADDRESS:** [Click here to enter text](#)  
**ID#:** [Click here to enter text](#)  
**Date:** [Click here to enter a date](#)

❖ The undersigned acknowledges understands the risks involved in OTC trading of contracts for differences, currencies, commodities, futures and indices and have also had sufficient opportunity to investigate the risks of trading such accounts with their own independent professional financial advisors.

Signature of Authorized representative : \_\_\_\_\_

Authorized Person Name & Title: [Click here to enter text](#)

Date: [Click here to enter a date](#)

Please fill out the Membership Application, scan and send it as an attachment to [accounts@caufex.com](mailto:accounts@caufex.com). The applicant must initial the bottom of each page as authorization of this Membership Application.

## MEMBERSHIP APPLICATION

- Individual Member (IM)** is an individual or organization and a basic member of the Exchange. Individual Member has the authorization to buy or sell financial instruments on CAUFEX using his/her own account on his/her own behalf only
- Associated Person (AP)** is an individual or organization who solicits orders, Clients or Client funds (or who supervises persons so engaged) on behalf of a Prime Clearing Member, Clearing Member, EPO, Non-clearing Broker. An AP is, in effect, anyone who is a salesperson or who supervises other salespersons for any of these categories of Members at CAUFEX
- Currency Corporate Trader (CCT)** is an individual or organization and a basic NON- CLEARING member of the Exchange. Currency Corporate Trader has the authorization to buy or sell financial instruments on CAUFEX using his/her account on his/her own behalf only. CCT has access to informational products available at CAUFEX (CAUFEX Pro Charts, News, Radio, etc.)
- Exchange Trading Advisor (ETA)** is an individual or organization which, for compensation or profit, advises others as to the value of or the advisability of buying or selling contracts/spot units on CAUFEX
- Non-Clearing Broker (NCB)** is an individual or organization, who has a direct relationship with Institutional and individual Members/ Clients and solicits or accepts orders to buy or sell futures contracts, options on futures, retail FOREX contracts or swaps but does not accept money or other assets from customers; trading activities performed by introduced members are supported by CAUFEX Prime Clearing (Liquidity) Members via Electronic Liquidity PITs and other software systems
- Exchange Pool Operator (EPO)** is an individual or organization which operates or solicits funds for an Exchange pool; that is, an Exchange Member in which funds are contributed by a number of persons are combined for the purpose of trading contracts/spot units on the Exchange or to invest in another Exchange pool. EPO must clear transactions and accept funds through the Prime Clearing Member or the Clearing Member at JSC CAUFEX.
- Clearing Member (CM)** solicits or accepts orders to buy or sell on JSC CAUFEX. Clearing Member is permitted to accept money or other assets from Clients to support such orders. Clearing member who is not a Market Maker has full access to informational products available at JSC CAUFEX, is supported by advanced JSC CAUFEX technology except real-time risk management system.
- Clearing Broker (CB)** is a qualified market participant who is authorized to buy or sell for another person using his own account. Clearing Broker can accept money or other assets from the client, but must clear transactions and accept funds through the Prime Clearing Member or the Clearing Member at JSC CAUFEX.
- Prime Clearing Member (PCM)** is a Market Maker at JSC CAUFEX. Prime Clearing Member solicits or accepts orders to buy or sell on JSC CAUFEX. Prime Clearing Member is permitted to accept money or other assets from Clients to support such orders. Prime Clearing Member has full access to informational products available at JSC CAUFEX, is supported by advanced JSC CAUFEX technology, including a real-time risk management system.

❖ **Acknowledgment:** If customer's annual income or net worth is less than \$25,000, customer acknowledges understanding of additional risk disclosure by signing this page below.

The loss in trading FX and CFDs can be substantial. You should therefore carefully consider whether such trading is suitable for you in light of your personal financial circumstances and financial resources. The high degree of leverage that is obtainable in FX and CFDs trading on account of minimal margin requirements can work against you as well as for you. The use of leverage can lead to large losses as well as gains

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- ❖ To be completed for each participant in the account, individually, jointly, or by the corporate officers authorized to make trading decisions for the account. For the purpose of this document the term "Trader" always refers to the entity or private person for whom this application has been made, regardless of legal form.

Full Name (Primary Account Holder)

Click here to enter text

Country of Incorporation (Primary Account Holder)

Click here to enter text

Date of Incorporation (Primary Account Holder)

Click here to enter text

Company Registered Number / Tax ID Number

Click here to enter text

Nature of Business

Click here to enter text

Authorized Trader's Name & Title

Click here to enter text

Country of citizenship

Click here to enter text

Date of birth

Click here to enter text

Marital Status

Click here to enter text

Street Address

Click here to enter text

Apartment/Suite

Click here to enter text

City

Click here to enter text

Country

Click here to enter text

Postal Code

Click here to enter text

Telephone (Home)

Click here to enter text

Telephone (Business)

Click here to enter text

E-mail Address

Click here to enter text

Full Name (Joint Account Holder, if any)

Click here to enter text

Date of birth

Click here to enter text

Country of citizenship

Click here to enter text

Marital Status

Click here to enter text

Address

Click here to enter text

Telephone (Home)

Click here to enter text

Telephone (Business)

Click here to enter text

E-mail Address

Click here to enter text

**Currency in which you wish to maintain your account balance and to use for Profit and Loss calculation:**

USD  EUR  GEL

Source of Funds: [Click here to enter text](#)

Approximate annual income: [Click here to enter text](#)

Approximate value of savings and investments (net worth): [Click here to enter text](#)

- ❖ The undersigned considered the financial risks involved in trading with regard to personal financial circumstances and financial resources, and wish to proceed with opening an account.

The undersigned consent to executing the Agreement and Transactions by electronic record and/or electronic signature

Trader's Name: [Click here to enter text](#) Sign: \_\_\_\_\_

Please state if you company is required to obtain a clearing license in the country of incorporation

YES  NO

Please name the regulating Authority your business is authorized by in your country of incorporation (if applicable):

• [Click here to enter text](#)

Please list other Exchanges you are currently a member of (if applicable):

• [Click here to enter text](#)

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## For Institutional Clients Only

**\* Company and Designated Representative contact Information (must supply TWO (2) Officers (Designated Officer and Alternate Designated Officer):**

COMPANY NAME:

REGISTERED ADDRESS:

MAILING ADDRESS:

BUSINESS REGISTRATION NUMBER

BUSINESS TAX ID NUMBER

COUNTRY OF INCORPORATION

TELEPHONE:

FAX:

EMAIL:

WEB PAGE:

### \*Designated Officer (#1):

COMPANY NAME:

CONTACT NAME AND TITLE:

TELEPHONE:

FAX:

EMAIL:

### \*Designated Officer (#2):

COMPANY NAME:

CONTACT NAME AND TITLE:

TELEPHONE:

FAX:

EMAIL:

### \*Alternate Designated Officer:

COMPANY NAME:

CONTACT NAME AND TITLE:

TELEPHONE:

FAX:

EMAIL:

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**\* Directors/Senior personnel of the Company**

\* Please complete the following list providing the details of the directors/senior personnel of the Company (attach a separate sheet if needed):

Name [Click here to enter text.](#)  
 Date of Birth [Click here to enter text.](#)  
 Address [Click here to enter text.](#)  
 Passport / ID [Click here to enter text.](#)  
 Role within the company [Click here to enter text.](#)

Does this person hold a position with other entities?  YES  NO

If YES, please include details [Click here to enter text.](#)

Name [Click here to enter text.](#)  
 Date of Birth [Click here to enter text.](#)  
 Address [Click here to enter text.](#)  
 Passport / ID [Click here to enter text.](#)  
 Role within the company [Click here to enter text.](#)

Does this person hold a position with other entities?  YES  NO

If YES, please include details [Click here to enter text.](#)

Name [Click here to enter text.](#)  
 Date of Birth [Click here to enter text.](#)  
 Address [Click here to enter text.](#)  
 Passport / ID [Click here to enter text.](#)  
 Role within the company [Click here to enter text.](#)

Does this person hold a position with other entities?  YES  NO

If YES, please include details [Click here to enter text.](#)

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**\* Corporate shareholders:**

\*Please complete the following list providing the details of your **corporate shareholders** (attach a separate sheet if needed):

Name

Date of Birth

Address

Passport / ID

% share Capital /Voting rights

Other business involved

Name

Date of Birth

Address

Passport / ID

% share Capital /Voting rights

Other business involved

Name

Date of Birth

Address

Passport / ID

% share Capital /Voting rights

Other business involved

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## KYC (Know Your Client) Guidelines

JSC CAUFEX (CAUFEX) has the responsibility to regulators for compliance with KYC procedures in regards to anti-money laundering (AML) regulations globally. For that reason, Members and Traders are required to submit corporate and individual proofs of identity. CAUFEX will not activate an account until satisfactory proof of identity is provided by potential membership and trading account holders, as determined by CAUFEX

### Explanatory Note for Membership Application

The following supporting documentation must accompany completed membership Application form and uploaded or send by e-mail to [accounts@caufex.com](mailto:accounts@caufex.com) , to assign membership and open the trading account, prior to being activated:

### Proof of Identification:

#### Individual

1. Name
2. Date and place of birth
3. Residence address and mailing address if different (PO Box alone will not be acceptable)
4. Official issued identification number (e.g., passport number, social security number, employee identification number or individual taxpayer identification number)
5. Copy of two valid photo identification of the principal(s) involved with the account (e.g., drivers license, armed forces identification, passport, alien identification card)
6. Proof of Address (Statement from Bank, Utility Bill (not a mobile phone bill - issued within the last 3 months), Local Authority Tax Bill (issued within 6 months or valid for current year))

#### Businesses

1. Copy of Memorandum and Articles of Association;
2. Copy of Certificate of Incorporation;
3. Copy of Certificate of Good Standing;
4. Copy of the Operating License issued by the corresponding Authority of the country of incorporation (if applicable) or certified statement of authorized representative of the company that the license is not required by the corresponding governing Authority;
5. Certified list of the directors, officers and shareholders, listing all of the directors, officers and shareholders names. This list should be certified under the corporate seal of the Company;
6. Proof of Registered Address and/ or Correspondence Address (recent original utility bill or bank statement displaying the Company's Name and Registered Address);
7. Verification of the names and addresses of the directors, officers, shareholders and authorized signatories by provision of:
  - a certified copy of Proof of Identification: JSC CAUFEX accepts valid passports, valid driver's licenses or other valid government issued photographic identification (showing photograph, personal details, signature, date and place of issue and serial number), and;
  - an original or certified copy of a separate document such as a recent (last 3 months) utility bill (gas, water, electricity, or fixed phone bill), bank statement, or banker's or lawyer's confirmation that verifies the applicant's address.
  - the date of birth of the individual should also be supplied if it is not evident from the documents described above; and

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Please answer all the questions stated in the Membership Application and do not leave any questions unanswered. If any question is not applicable, please state "NA".

Upon acceptance of the Membership Application by CAUFEX membership and compliance departments the Applicant will be further instructed before starting transactional activity.

- ❖ **The undersigned agrees consent to executing the Agreement and Transactions by electronic record and/or electronic signature. The undersigned have read and understood the foregoing Consent to KYC Guidelines and Explanatory Note for Membership Application. The undersigned agrees to be bound by all of the terms and conditions hereof.**

**FULL NAME:**

**CITEZENSHIP:**

**ADDRESS:**

**ID#:**

**Date:**

Signature of Authorized representative / Trader \_\_\_\_\_

Authorized Person Name & Title:

Date:

### Designated Bank Accounts for Money Settlement

#### Main Account:

- BANK NAME
- COUNTRY
- BANK CODE
- BANK SWIFT / ABA
- BANK ACCOUNT
- PHONE
- FAX
- E-MAIL

#### Sub Account (s)

- BANK NAME
- COUNTRY
- BANK CODE
- BANK SWIFT / ABA
- BANK ACCOUNT
- PHONE
- FAX
- E-MAIL

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**Will you receive or hold client assets?**

YES  NO

**Please state the estimated transactions volume of trading on CAUFEX™**

Daily  Weekly Sessions  Monthly  Quarter  Year

**BALANCE SHEET:****Assets:**

- FIXED ASSETS
- OTHER ASSETS
- CURRENT ASSETS
- CASH DEPOSITS IN BANKS
- INVESTMENTS IN LISTED SECURITIES
- RECEIVABLES
- OTHER CURRENT ASSETS
- TOTAL ASSETS

Click here to enter text.  
Click here to enter text.  
Click here to enter text.  
Click here to enter text.  
Click here to enter text.  
Click here to enter text.  
Click here to enter text.  
Click here to enter text.

**Liabilities:**

- CURRENT LIABILITIES
- BANK OVERDRAFT/LOANS
- OTHER CURRENT LIABILITIES
- LONG TERM LIABILITIES
- TOTAL LIABILITIES

Click here to enter text.  
Click here to enter text.  
Click here to enter text.  
Click here to enter text.  
Click here to enter text.

**Net Assets:**

- (TOTAL ASSETS–TOTAL LIABILITIES)

Click here to enter text.

**Shareholder's Equity:**

- SHARE CAPITAL
- OTHER RESERVES
- RETAINED PROFITS/LOSSES

Click here to enter text.  
Click here to enter text.  
Click here to enter text.

**Total Shareholders' Equity:**

- 

Click here to enter text.

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### Declaration of Applicant

We, the Undersigned:

- a. Declare that our board of directors has passed resolution(s) approving this application (copy is attached) and agreeing to be bound by the rules, regulations and procedures of CAUFEX, as the case may be, upon this application being approved;
- b. Consent that CAUFEX as the case may be, may use and rely on the information stated in our application and documents submitted to  
CAUFEX for obtaining a membership status;
- c. Declare that our company is properly registered and licensed by the rules and regulations of the regulating Authority of the country of incorporation and all the information provided in this application regarding, but not limited to the registration and licensing information as well as the supporting documents are complete, true and correct and that we have not made or omitted to make any statements or omissions which would render such information untrue or misleading;
- d. Undertake that we shall notify CAUFEX, as the case may be, immediately of any changes in the information given in this application (including the information given in regard to the company registration and licensing status as well as any changes of the list of directors and/or shareholders);
- e. Understand that CAUFEX, as the case may be, may take disciplinary proceedings against a Member which has made a false or misleading representation in relation to its application for membership. CAUFEX reserves the right to refuse or cancel any application of membership;
- f. Undertake that we shall comply with all applicable rules, regulations and procedures of CAUFEX, as the case may be, from time-to-time in force, the conditions stated in the letter of approval and any other directives made by CAUFEX, as the case may be; and agree that any non-compliance shall render us, as an applicant liable to disciplinary proceedings;
- g. Understand that Failure to supply the requested corporate and personal information may result in delay or in refusal of the application if it affects CAUFEX ability to assess whether you are able to comply with the applicable criteria.

Personal information supplied to CAUFEX will be kept confidential, but may be disclosed to any recognized exchange directors, employees, controllers, agents of CAUFEX, who shall be under the same confidentiality duty as CAUFEX.

❖ The undersigned agrees to be bound by all of the terms and conditions hereof.

❖  **I CERTIFY AND AGREE**

❖ **Trader Information**

**FULL NAME & TITLE**

[Click here to enter text.](#)

**CITIZENSHIP:**

[Click here to enter text.](#)

**ADDRESS:**

[Click here to enter text.](#)

**ID#:**

[Click here to enter text.](#)

**Date:**

[Click here to enter a date.](#)

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### Account opening questionnaire

- Where did you hear about CAUFEX™?

1. Do you have experience trading securities?  YES  NO •YEARS
2. Experience trading options?  YES  NO •YEARS
3. Do you have experience trading currencies / commodities?  YES  NO •YEARS
4. Do you have experience trading futures?  YES  NO •YEARS
5. What is your total estimated annual income? \$
6. Will any person other than Trader control, manage, or direct the trading in this account?  
 YES  NO
7. Do you have or have you ever had any other account(s) with CAUFEX?  YES  NO
  - If YES, please provide Account Number:

The undersigned hereby attest(s) and certifies that the above information is complete and accurate. The undersigned hereby authorize(s) CAUFEX to verify any or all of the foregoing information.

- ❖ *JSC CAUFEX's services are not intended for distribution to, or use by, any person, corporation, trust or partnership in any country or jurisdiction where such distribution or use would be contrary to local law or regulation. It is the responsibility of the trader, client or customer to ascertain the terms of and comply with any local law or regulation to which they are subject.*

- ❖ I declare that all statement are true .  
The undersigned agrees to be bound by all of the terms and conditions hereof. \*

- ❖  I CERTIFY & AGREE

#### Applicant's Information

FULL NAME:   
 CITEZNSHIP:   
 ADDRESS:   
 ID#:   
 Date:

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