

INDIVIDUAL CLIENT ACCOUNT APPLICATION FORM

IMPORTANT NOTICE

Before completing this Application Form to open an account it is essential that you have read and fully understood Lucror Capital Markets General Terms and Conditions and Disclosure Statement. If you have not received, read and fully understood these documents please do not complete this Application Form until you have. Please contact **accounts@lucrorfx.com** for copies of these documents.

Please complete all sections of this form. When completed, this application will form part of your Agreement with Lucror Capital Markets LP. Please note that the Agreement consists of this Application Form, General Terms & Conditions and Disclosure Statement.

Lucror Capital Markets LP (LCM) will use the information gained from this application form in assessing an applicant's suitability in entering this business. For this reason it is essential that all the information provided below is entirely accurate and if, at a future date, any circumstances adversely affect this information you are required to write to us advising us of these details.

For any questions related to the completion of this form, the General Terms and Conditions, the Disclosure Statement or the required documents to submit, please contact us at: **accounts@lucrorfx.com**

All application forms must be accompanied by one document from list A and one from list B.

LIST A – PROOF OF IDENTITY

A high quality color copy of a current government issued identification showing your photo e.g. Passport, National Identity Card or Drivers Licence.

LIST B – PROOF OF IDENTITY AND ADDRESS

A Bank Statement showing your name and address, the banks name and address and your account number. This should be dated within the last 6 months.

HOW TO SUBMIT

We rely on the accuracy of the information you provide in assessing your application. It is therefore essential that if any of your circumstances change, you should inform us immediately.

Please complete the application form, attach relevant documentation and forward to us by:

Mail: PO Box 305620 Triton Plaza, Auckland 0757, New Zealand

Fax: NZ: +64. 2825510768

Email: accounts@lucrorfx.com

Web: www.lucrorfx.com

CLIENT ACCOUNT APPLICATION FORM

APPLICANT INFORMATION

First Names:		Surname/Family Name:	
Nationality:	Date of Birth:	Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married / De facto <input type="checkbox"/> Divorced / Widowed		
Email:	Phone:	Fax:	
Current Address:			
City:	State:	Country:	

EMPLOYMENT INFORMATION

Current Employer (If self employed please state the nature of your business and its trading name):		
Employer address:		How long?
City:	State:	Country:
Phone:	E-mail:	Fax:
Position:	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual income:

FINANCIAL INFORMATION

Approximate Net Worth:	<input type="checkbox"/> \$25,000 - \$50,000	<input type="checkbox"/> \$50,001 - \$250,000	<input type="checkbox"/> Over \$250,001
Investment Objective:	<input type="checkbox"/> Speculative	<input type="checkbox"/> Hedging	
Approximate Investment:	<input type="checkbox"/> \$1,000 - \$50,000	<input type="checkbox"/> \$50,001 - \$250,000	<input type="checkbox"/> Over \$250,001
Trading Experience			
Equities:	<input type="checkbox"/> 1-3 Years	<input type="checkbox"/> 3-5 Years	<input type="checkbox"/> Over 5 Years
Options:	<input type="checkbox"/> 1-3 Years	<input type="checkbox"/> 3-5 Years	<input type="checkbox"/> Over 5 Years
Futures/CFDs:	<input type="checkbox"/> 1-3 Years	<input type="checkbox"/> 3-5 Years	<input type="checkbox"/> Over 5 Years
FOREX:	<input type="checkbox"/> 1-3 Years	<input type="checkbox"/> 3-5 Years	<input type="checkbox"/> Over 5 Years

BANKING DETAILS

Name of Bank:	
Account Holders Name:	Base Currency of Account:
Account Number:	

CLIENT ACCOUNT APPLICATION FORM

AUTHORISED PERSONS

Will any other person aside from you personally give us instructions regarding trading to be undertaken on your account, or will an agent act on your behalf? Yes No

If yes, please list names of all persons authorised to act on your account :

Please note, each Authorised person will need to complete the Authorised Persons form (below) and each person must provide two forms of identification (One from List A and one from List B) prior to be accepted as an Authorised Person.

AUTHORISED PERSON (1)

First Names:	Surname/Family Name:	
Relationship to Applicant:	Date of birth:	
Phone:	Email:	
Current address:		
City:	State:	Country:
Identification Type & Number:	Signature	

AUTHORISED PERSON (2)

First Names:	Surname/Family Name:	
Relationship to Applicant:	Date of birth:	
Phone:	Email:	
Current address:		
City:	State:	Country:
Identification Type & Number:	Signature	

AUTHORISED PERSON (3)

First Names:	Surname/Family Name:	
Relationship to Applicant:	Date of birth:	
Phone:	Email:	
Current address:		
City:	State:	Country:
Identification Type & Number:	Signature	

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DECLARATION

In applying to become a Client of Lucror Capital Markets LP , I confirm that I:

1. Am over 18 and that the information provided by me to you is true and accurate.
2. Have authority to execute this agreement
3. Have read, understood and accept in full Lucror Capital Markets LP Agreement (including the General Terms and Conditions and Disclosure Statement) and have a copy of this Agreement
4. Understand that trading leveraged products carries a high level of risk and I have been advised to seek independent financial advice.
5. Will act in good faith and observe all applicable laws, codes and regulations during my dealings with Lucror Capital Markets LP.
6. Agree to enter into the Agreement in accordance with the General Terms and Conditions of Business.

CLIENT SERVICES AGREEMENT

The Client acknowledges that:

1. The Client has appointed Lucror Capital Markets LP as the Client's agent for the purpose of dealing in Spot Foreign Exchange in accordance with the terms of the General Terms and Conditions and Disclosure Statement.
2. The Client agrees that the General Terms and Conditions and Disclosure Statement and this Acknowledgement are the one agreement for the purposes of this agreement.
3. The Client acknowledges that they are the beneficial owner of all monies lodged with Lucror Capital Markets LP and should funds wished to be lodged for the benefit of the Client's account that are not wholly owned by the Client, the Client will request approval from Lucror Capital Markets LP in writing prior to lodging such monies.
4. The Client confirms that it does not have any pending litigation, disputed accounts or other unresolved matters whatsoever. If the Client does have any pending litigation, disputed accounts or other unresolved matters whatsoever then the Client must advise Lucror Capital Markets LP in writing of such matters and Lucror Capital Markets LP must consider such matters prior to approving the opening of the account.
5. The Client acknowledges that all information provided in this Application Form including all information pertaining to the Client in the Client Information section of this agreement is true and accurate. Further, the Client will immediately notify Lucror Capital Markets LP in writing if any representations materially change or cease to be true and accurate.

SIGNATURES

*I/*We confirm that *I/*we have heard/read and understand this Client Services Agreement, Declaration, General Terms and Conditions and the Disclosure Statement and Acknowledgement and that the trading terms and services used in it have been explained to *me/*us by the giver of this statement. By signing this Client Services Agreement the Client agrees to be legally bound by its terms and conditions.

Signature of applicant:

Date:

Accepted by Lucror Capital Markets LP: