

Please return the completed form to fax nr. +31 20 550 5101

**Application Form for Primary Market Maker at Liffe Brussels**

The undersigned,

Name \_\_\_\_\_

Member \_\_\_\_\_

Address \_\_\_\_\_

Mnemonic \_\_\_\_\_ Phone nr. \_\_\_\_\_

Hereinafter “the Applicant”,

in its capacity as Trader at Liffe Brussels hereby applies for a position as Primary Market Maker (PMM)

in the option class(es): \_\_\_\_\_

The applicant is willing and able to fulfil the obligations of a PMM as set out for the concerning option class(es) and to sign the agreement in which the rights and obligations of a PMM are laid down.

The Applicant has consulted its Clearing Member,

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone nr \_\_\_\_\_

who fully supports this application. In witness of approval of the application this form bears the countersignature of the abovementioned Clearing Member.

Place, \_\_\_\_\_

Date, \_\_\_\_\_

On behalf of the Applicant,

On behalf of the Applicant’s Clearing Member

\_\_\_\_\_

\_\_\_\_\_