

APPLICATION FORM FOR ADMISSION & REGISTRATION OF A RESPONSIBLE PERSON ON THE EURONEXT SECURITIES AND/OR DERIVATIVES MARKETS

This application will only be taken into consideration when this form and all necessary documents have been returned to the Membership Department, who may request additional information.

Please note

- The term “Member” in this application shall refer to a Member or to an applicant for membership, as the case may be. It shall in no circumstances actually confer any such membership by itself.
- A Responsible Person shall have the following duties, pursuant to article 2202 of the Euronext Rule Book – Book I, Notice 2-01 (art 2), the Euronext Trading Procedures (art 3.1):
 - Have the authority to adjust or withdraw any orders submitted under his responsibility or his ITM,
 - Assure himself the competence and suitability of any person conducting business under his responsibility or his ITM,
 - Ensure, as far as possible, that all business conducted by the member is conducted in accordance with the Rules and Trading Manual
 - Be able to ascertain and be willing to disclose Euronext the immediate source of all orders,
 - Ensure that at least one of the Member’s Responsible Persons is contactable during Euronext European market hours
 - Is required to oversee the trading activities of any person conducting business under his responsibility or his ITM.
- The operational procedure describing the order and trade cancellation process for European markets (Info Flash dated 2 September 2013)

1. DETAILS OF THE MEMBER FIRM

(Section to be completed by the member firm)

Name of Member firm	
Member address in full	

requests the registration as a **Responsible Person** of the following person, within the meaning of the Euronext Rule Book, Notice 2-01 and the Euronext Trading Procedures (art 3.1)

Full name	
Position with Member firm	

2. TRADING ACTIVITY

This **Responsible Person** will be responsible for

ON THE EURONEXT SECURITIES MARKETS

CONFIRMATION OF THE TRADING MEMBER ID(S) THROUGH WHICH YOU WILL TRADE:

Trading Member ID(s)	
----------------------	--

Type of activity (please tick at least one box)

- ☐ Liquidity provider/Market Maker
 ☐ Arbitrage
 ☐ Retail
☐ Institutional and professional customer
☐ Other (please detail):

This **Responsible Person** is responsible for activity on Euronext London *

☐

** please read article 7 of Notice 2-01 specifically linked to this market*

ON THE EURONEXT DERIVATIVES MARKETS**CONFIRMATION OF THE TRADING MEMBER ID(S)/MNEMONIC(S) THROUGH WHICH YOU WILL TRADE:**

Trading Member ID(s)	
Mnemonic(s)	

Type of activity (please tick at least one box):

- ☐ **Liquidity provider/Market Maker**
☐ **Arbitrage**
☐ **Retail**
- ☐ **Institutional and professional customer**
- ☐ **Other** (please detail):

AFFILIATE OF A EURONEXT TRADING MEMBERIf the **Responsible Person** acts on behalf of an affiliate, please fill in the name of the affiliate:

Affiliated company name	
-------------------------	--

- on the Euronext Securities markets ☐
- on the Euronext Derivatives markets ☐

3. DETAILS OF THE PROSPECTIVE RESPONSIBLE PERSON

(This section to be completed by the prospective Responsible Person)

Family name	
First name(s)	
Office address	
Country	
Telephone (office)	
Mobile phone	
Email (office)	
Nationality	

This application form should be accompanied by:

ENCLOSED:	YES
A scanned good copy of a valid proof of identity , such as a passport (no driving license)	

4. EURONEXT RULE BOOK

A Responsible Person who has been registered by Euronext shall be bound by all applicable rules, regulations, general conditions and notices with relation to the function of Responsible Person laid down at any time by Euronext, in the Euronext Rule Book, Books I and II and Notices issued pursuant to the Rule Book.

The prospective Responsible Person is aware that providing incomplete or inaccurate information may at all times constitute grounds for termination at any given moment of the applicant's position as a Responsible Person.

This application is also governed by the said rules.

5. SWORN STATEMENT

I, the undersigned

Last Name: (followed by maiden name if applicable)	
First Name(s)	
Date of Birth (day, month and year)	
Place of Birth	
<p>do hereby certify that I have not been subject to:</p> <ul style="list-style-type: none"> ■ any criminal conviction, any civil or administrative sanction liable to prohibit my managing, administering or directing a legal entity, or my exercising a commercial activity; ■ any investigation or proceeding which could lead to criminal conviction or a civil or administrative sanction liable to prohibit my managing, administering or directing, of a legal entity, or my exercising, of a commercial activity. 	
<p>Are there any other facts or circumstances which might reasonably be considered relevant to the evaluation of your compliance with the requirements for admission as a Responsible Person at Euronext as specified in the Euronext Rulebook, Books I and II, especially but not exclusively as they relate to financial problems and professional conflicts?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please explain:</p>	
Signature of the Prospective Responsible Person	
Date	

6. STATEMENT BY THE PROSPECTIVE RESPONSIBLE PERSON

1. By signing this form, the prospective Responsible Person agrees to comply immediately with requests from Euronext's Membership Department for any information, which this department deems necessary for a thorough evaluation of this application.
2. The prospective Responsible Person also agrees and hereby authorises Euronext to submit this form to the Competent Authority. The Competent Authority may hold an enquiry into the antecedents of the prospective Responsible Person.
3. The prospective Responsible Person and the Member are aware that Euronext may decide to register the prospective Responsible Person on the express condition that no facts emerge from the Competent Authority's investigation into antecedents, which could obstruct registration.
4. The prospective Responsible Person agrees that in connection with this application Euronext's Membership Department may request information on the prospective Responsible Person from authorities and/or persons (previous employers, etc.).
5. The prospective Responsible Person also agrees and hereby grants permission for any information on him/her present in the files kept by the Competent Authority to be provided to Euronext in connection with his/her application for registration as a Responsible Person.
6. The prospective Responsible Person agrees to accept the obligation that Euronext should be able to reach him/her at all times during trading hours.

The undersigned declare that this form and appendices have been completed truthfully and in full.

All changes to the above information must be reported immediately in writing to Euronext's Membership department to euronextmembership@euronext.com

Authorised Representative(s) currently registered by Euronext			
Full name		Full name	
Position		Position	
Signature		Signature	
Place		Place	
Date		Date	

Please send this form duly signed and including the supportive documents (ID card) to
EuronextMembership@euronext.com.