



## REGISTRATION FORM

### ACCESS BY MEMBERS TO EURONEXT REGULATORY REPORTING SOLUTION

This Registration Form and the applicable Terms and Conditions are issued under the Rules by Euronext Notice on Regulatory Reporting dated 3 November 2017. The Registration Form must be executed by any and all Members prior to commencement of any such access and use in accordance with applicable Laws.

Capitalised terms defined in this Registration Form have the same meanings when used in the Terms and Conditions and vice versa. The Rules shall take precedence over the provisions of this Registration Form and/or the Terms and Conditions in the event of any conflict of terms.

#### 1. EURONEXT MEMBER INFORMATION

---

Member name		Member ID:
Trading activity		
LEI or CICI code		
LEI code expiration date		
Contact name		
Contact email address		
Trading capacity	<input type="checkbox"/> Broker	<input type="checkbox"/> Dealer

According to Clause 11 of the Terms and Conditions, names and contact details of 2 persons who shall be the contacts of Euronext for any question arising from the performance of the Reporting Solution, including for notices purposes (this information needs to be kept up-to-date at all times):

MEMBER	Business Contact	Technical Contact
		<input type="checkbox"/> same as Business Contact
Name:		
Job Title:		
Telephone:		
Email:		



Address 1 (postal address):		
Address 2 (carrier address):		

## 2. TECHNICAL SERVICE PROVIDER

---

If you intend to access the Reporting Solution through a Service Provider, please fill in the following table:

Service Provider Name	
Contact name	
Contact email address	

## 3. EURONEXT MEMBER'S REGULATORY REPORTING OBLIGATIONS

---

Please indicate which Euronext Reporting Services you will use:

SLC Manager	<input checked="" type="checkbox"/>
Commodities Position Reporting	<input type="checkbox"/>
Reporting for Non-MiFID Euronext Members	<input type="checkbox"/>

More information is available on <https://www.euronext.com/en/mifid-2>.

## 4. EURONEXT MEMBER'S CLIENTS (POSITION HOLDERS FOR COMMODITY POSITION REPORTING ONLY)

---

### ▪ LIST OF POSITION HOLDERS

The list of all the Member's Clients which are Commodity positions holders must be provided to Euronext using the Position Holder Form which forms part of the registration process available at <https://www.euronext.com/en/mifid-2>.

Please fill in the Position Holder Form and return it by email to: [euronextmembership@euronext.com](mailto:euronextmembership@euronext.com)

In case of any change in the Member's Clients list, the Member must update the Position Holder Excel Form and send it to Euronext by email to: [euronextmembership@euronext.com](mailto:euronextmembership@euronext.com).

### ▪ LIST OF POSITION HOLDERS FOR DIRECT REPORTING:

In addition, the Member's Client(s), if any, which shall access to and use the Reporting Solution for submitting their own Commodity Position Reports directly to Euronext on Member's behalf (under Member's responsibility in

accordance with Clause 26.3 of the Terms and Conditions) must be flagged for direct reporting in the Position Holder Form. This information needs to be kept up-to-date at all times by Member as an ongoing obligation.

## 5. EURONEXT INFORMATION

---

All notices by Member to Euronext shall be sent to the following Euronext contact:

Name:	Euronext Membership Department
Address 1 (postal address):	Beursplein 5, 1012 JW Amsterdam – The Netherlands
Telephone:	+31 20 721 4264 / +33 1 70 48 25 05
Email:	euronextmembership@euronext.com

## 6. ACCESS TO THE REPORTING SOLUTION

---

The Member's MCAs are able to order GUI accesses to the Reporting Solution using the Access Form on the Euronext Connect MCA Web Portal : <http://connect2.euronext.com>.

Details are available in Section D of the Schedule appended to the Terms & Conditions.

**The Member's access to and use of the Reporting Solution in the production environment constitutes acceptance of this Registration Form and the Terms and Conditions.**

## 7. SIGNATURE

---

<b>NAME:</b>	
Share Capital:	
Companies' Registration No:	
Headquartered at:	
Name of the Authorised Representative:	
Title:	



Signature:	
Date:	