

| I. CLIENT INFORMATION: | |
|---|--|
| 1. First Name: * | |
| 2. Middle Name:* | |
| 3. Last Name:* | |
| 4. Date of Birth:* | |
| 5. Passport/ID Card number:* | |
| 6. Citizenship:* | |
| 7. Permanent Address:* | |
| 8. Postal Address: * | |
| 9. Country code, area code, telephone #: | |
| 10. Fax #: | |
| 11. E-mail:* | |
| 12. Marital Status: | |
| II. HOW DID YOU FIND OUT ABOUT US? * | |
| 1. A friend told me | <input type="checkbox"/> |
| 2. Search engine | <input type="checkbox"/> |
| 3. From Google | <input type="checkbox"/> |
| 4. From Yahoo | <input type="checkbox"/> |
| 5. From Rambler | <input type="checkbox"/> |
| 6. I saw an ad | <input type="checkbox"/> |
| 7. While surfing on the Internet | <input type="checkbox"/> |
| 8. Link from another site | <input type="checkbox"/> |
| 9. I received an e-mail | <input type="checkbox"/> |
| 10. Other (please specify) | |
| III. INVESTMENT TARGETS * | |
| What is your primary objective: - Speculation - Hedging | <input type="checkbox"/> <input type="checkbox"/> |
| IV. FINANCIAL DETAILS* | |
| 1. Annual income: | |
| 2. Risk capital: | |
| V. TRADING KNOWLEDGE AND EXPERIENCE* | |
| Do you have a numerate university degree? (For example: economics, mathematics, physics, accounting) If yes, please provide details: | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
|---|--|
| Do you have a relevant professional qualification that you consider would assist you understanding of leveraged products in general? If yes, please provide details: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Stock Trading: | <input type="checkbox"/> No experience <input type="checkbox"/> less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years |
| Spot and Forward trades with Foreign Currency, Currency Options: | <input type="checkbox"/> No experience <input type="checkbox"/> less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years |
| CFDs on Shares and Indices: | <input type="checkbox"/> No experience <input type="checkbox"/> less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years |
| CFDs on Commodity Futures: | <input type="checkbox"/> No experience <input type="checkbox"/> less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years |
| Approximate number of transactions per month: | |
| Average amount of money involved in one transaction: | |
| VI. APPLICATION DOCUMENTS | |
| 1. Copy of Passport/ID Card* | 2. Proof of Residential Address* |

* **Mandatory fields**

Declarations:

1. I accept and agree to be classified by Deltastock AD as a "non-professional client".
2. I am informed that I have the right to request a change in my classification to a "professional client" status, as well as that any such change will result in a lower level of regulatory protection.
3. I do wish / I do not wish to be classified as a "professional client".
4. I DECLARE THE ABOVE INFORMATION IS COMPLETE AND ACCURATE AND I WILL PROMPTLY NOTIFY DELTASTOCK AD. IN WRITING IF ANY OF THE REPRESENTATIONS CONTAINED HEREIN SHALL MATERIALLY CHANGE OR CEASE TO BE TRUE AND CORRECT.

Date: _____
dd/mm/yyyy

Signature: _____