

PERSONAL INFORMATION				
Last Name	First Name	Middle Initial	Date of Birth / /	SSN or Identification number
Address (Line 1) Street City Zip code			Home Phone Mobile Phone Fax	Citizenship Email Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married
BANK INFORMATION				
Account holder's name			Bank Account Number	
Bank Name Bank ABA/SWIFT Bank phone number			Bank Address: Street City State/Region Zip code Country	
EMPLOYMENT AND ASSETS INFORMATION				
Employment Status			Name of Company _____ Position _____ Type of business/industry _____ Place of study (if applicable) _____	
Net Worth			Total Annual Income	
Total Outstanding Debt			Total Liquid Assets	
			What is the highest level of education you have completed?	
INVESTING EXPERIENCE <i>(If answer to any of the questions is "Yes", please provide details on a separate sheet or follow the instructions)</i>				
Have you ever defaulted on financial obligation?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever declared Bankruptcy?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Will any portion of your investment be retirement income? <i>If Yes, Sign "Additional Risk Disclosure"</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you or have you ever been a member of the National Futures Association (NFA) or the National Association of Securities Dealers? <i>If Yes, please send us a copy of your license</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you hold any professional trading licenses? <i>If yes, please send us a copy</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you understand the following? Risk of Loss (including the risk of total loss of investment)				<input type="checkbox"/> Yes <input type="checkbox"/> No
Foreign Exchange Trading				<input type="checkbox"/> Yes <input type="checkbox"/> No
Margin and Margin Calls				<input type="checkbox"/> Yes <input type="checkbox"/> No
Forex Club's Margin Policy				<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been a party in an investigation, complaint, settlement, arbitration proceeding or reparations proceeding with the NASD, NFA, CFTC or FDIC?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever filed a complaint against a Foreign Exchange Dealer, Securities Broker or Commodities Dealer?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any other accounts with Forex Club Financial Company Inc (New York)? <i>If yes, please list account number(s)</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you subject to backup withholding taxes? <i>(for US citizens only)</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any experience in trading? <i>(If yes, please tell us how many years of experience)</i>				
Foreign Exchange Trading Commodities (including OTC Forex)				<input type="checkbox"/> Yes <input type="checkbox"/> No _____
Securities (Stocks and Bonds)		<input type="checkbox"/> Yes <input type="checkbox"/> No _____	Commodities (excluding OTC Forex)	
Options		<input type="checkbox"/> Yes <input type="checkbox"/> No _____	Hedge Funds	
Mutual Funds		<input type="checkbox"/> Yes <input type="checkbox"/> No _____	Futures	
			<input type="checkbox"/> Yes <input type="checkbox"/> No _____	