

MEMBER APPLICATION FORM



Introduction

Thank you for your interest in becoming a Member of Aquis Exchange.

Becoming a Member is a straightforward process that involves completing this application form and associated documents for the services that you wish to use. Alongside this, your firm will need to review and sign the Aquis Exchange Member Participation Agreement. Legal agreements relating to additional Aquis Exchange services are specified in Section Two of this form.

If you have any questions, please contact our Compliance team.

Completed application forms can be submitted by email to compliance@aquis.eu. A hard copy original should also be sent by post to:

Aquis Exchange – Membership 77 Cornhill, London EC3V 3QQ UK

Please provide the following supporting documents with your application:

- A copy of your firm's corporate ownership structure
- Certificate of incorporation
- Proof of your firm's regulated status
- A copy of your firm's latest audited accounts or a web link to these
- Your firm's logo in JPEG format, for us to include on our website



Section 1: Applicant Information

Name of Legal Entity ("the Applicant")	
Country of Registration	
Registered Address	
Business Address (if different to the above)	
Switchboard Phone Number	
Website	
	ce(s) from which the Applicant firm intends to access Aquis Exchange. e Applicant will need to complete a separate Member Application Form.
Name of Branch Office	
Address of Branch Office	
Affiliate firms which are not a branch of t	he Applicant will need to submit a separate membership application.
Details of the person handling your fi	rm's application
Name	
Title	
Phone	
Email	
Please indicate which type of business you intend to conduct on Aquis Exchange	Client Proprietary (excluding client facilitation) If conducting proprietary trading business please contact the Aquis Exchange Compliance team before completing the remainder of this form.
Section 2: Services Req	
Aquis Exchange Order Book	
Sponsored Access	Please also complete the Sponsored Access Addendum
Liquidity Provider Scheme	Please also complete the Liquidity Provider Addendum

Member Application Form, version 2.8



Direct Market Data Feed	Please also complete the Direct Data Licence and Order Form			
FIX Drop Copy Feed				
Self-Trade Prevention				
Market At Close (MaC)				
Section 3: Regulatory S	tatus			
	☐ Yes ☐ No			
Is the applicant firm authorised by an EEA regulator?	If not, please contact the Aquis Exchange Compliance team before completing the rest of this form.			
Please state which regulator your firm is authorised by				
Firm authorisation reference number				
Please state which other exchanges or trading venues the applicant is a member of				
Legal Entity Identifier (LEI) code				
Section 4: Compliance By submitting this form, the Applicant co	onfirms that the following statements are true (please tick to confirm):			
All relevant staff at the applica	nt firm have read and understood the Aquis Exchange Rulebook and the ll comply with all of the Rules set out.			
—	All relevant staff, who will be involved in the applicant firm's activity on Aquis Exchange are competent of are supervised to an adequate level.			
The Applicant firm has appropriate systems and controls in place to ensure that it complies with the Aquis Exchange rules and procedures.				
Please explain the measures that your f	irm has in place to prevent disorderly trading:			



Automatic cancel on disconnect

Please state whether connectivity to Aquis		our firm's o	pen orders to be a	utomatically	cancelled in the	event that
Yes	☐ No					
Section 5: C	ontact Infor	mation				
Contact type	Name		Phone		Email	
Business						
Trading						
Compliance						
Technical operations						
Post trade						
Legal						
Billing						
Email address for system alerts and notifications						
Section 6: B	illing Details	6				
Billing address						
VAT number						
Contact name for	invoices					
Title						
Phone						
Email						



Section 7: Requested Markets

Please indicate which markets your firm would like to access on Aquis Exchange.

Market	Access	Trading	Clearing	ССР
	required	BIC(s)	member name	(EuroCCP/LCH/SIX x-clear)
Austria	Yes / No			
Belgium	Yes / No			
Denmark	Yes / No			
Finland	Yes / No			
France	Yes / No			
Germany	Yes / No			
Italy	Yes / No			
Ireland	Yes / No			
Netherlands	Yes / No			
Norway	Yes / No			
Portugal	Yes / No			
Spain	Yes / No			
Sweden	Yes / No			
Switzerland	Yes / No			
UK	Yes / No			
IDRs	Yes / No			

Section 8: Clearing Arrangements

How will your firm's trades on Aquis Exchange be cleared?	
Self-clearing	
Third party clearer	
If using a third party clearer, please confirm which one:	



Section 9: Connectivity

	No			
Contact type	Name		Phone	Email
Contact for FIX/ATP IDs				
CONTROL TO FINATE IDS				
Connectivity Team Contact				
Network Support (Group Contact)				
lease indicate which conne Direct Access (Cross Connect or Lease		Phys	like to request: ical network port at A	quis Exchange
Access via a Third Party I (Extranet)	Access to Aquis Exchange and/or its market data using a third party network.			
				widin.
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Applicant Declaration

Capitalised words in this declaration have the meaning as set out in the Member Participation Agreement.

- 1. The Applicant hereby applies to enter into the Member Participation Agreement and confirms that the information contained in this Application Form or otherwise provided to Aquis Exchange is true, complete and accurate.
- 2. The Applicant agrees to inform Aquis Exchange in the event that it wishes to amend its business profile in relation to its activities on Aquis Exchange.
- 3. The Applicant acknowledges that it has read and understood the Terms and Conditions and agrees to abide by the Terms and Conditions on a continuing basis.
- 4. The Applicant acknowledges that it has read and understood the Rules and agrees to abide by the Rules on a continuing basis.
- 5. The Applicant agrees to pay the Fees as specified by Aquis Exchange in the Fee Schedule.
- 6. The Applicant confirms that it has appropriate clearing arrangements in place for the markets that it wishes to trade on Aquis Exchange.

This declaration must be signed by an authorised signatory of the Applicant firm for and on behalf of the Applicant:

SIGNED by			
a duly authorised	d represei	ntative	
on behalf of			
on date	/	/	

SIGNED by			
a duly authorised	represer	ntative	
on behalf of Aqui	s Excha	nge PLC	
on date	/	/	



Appendix 1: Trading Profile Contacts

Please provide details of the individuals at your firm who should have the authority to request mass order cancellations, trade cancellations or changes to the firm's trading profile.

It is the responsibility of the Member firm to ensure that this list is up to date and to inform Aquis Exchange of any changes. Only individuals who are named below will be able to request changes to this list.

Name	Title	Phone	Email	

Trade Bust Contacts

Please list a few individuals who can be contacted by Aquis Exchange in the event that a trade is deemed to be erroneous and requires cancellation by our surveillance team.

Name	Title	Phone	Email	

GCM Contacts

Please list a few individuals at your CGM(s) who are authorised to request order cancellations or changes to your clearing permissions.

Name	Title	Phone	Email