



TRUST APPLICATION FORM

Before completing this application form, please ensure that you have obtained and read the information regarding the products and services provided by Saxo Capital Markets South Africa ("SCMSA") and all relevant terms and policies made available, and updated from time to time on our website (www.za.saxomarkets.com). Once completed, this form and any supporting documents should be sent to SCMSA at the business address below or alternatively please email a scanned copy to saam@saxomarkets.co.za or fax the completed application to +27 (11) 784 7078.

PLEASE COMPLETE THE FORM IN BLOCK LETTERS AND IN BLACK OR BLUE INK. ALL ITEMS MARKED WITH * MUST BE PROVIDED.

Initial list of certified documents to be provided with this application form:

- Trust Deed;
- Letters of Authority;
- Resolution of the Trustee's;
- Bank Statement evidencing account details.

It may be necessary for us to request further documentation and information in order to complete the due diligence process. The form must be signed by at least two trustees unless the Trust has a sole trustee.

ALL ITEMS WITH * MUST BE PROVIDED.

Part 1 | Trust Details

*Trust Name:

*Registered Address: Address of Master where Trust Registered

*Postcode:

*Country:

*Banking details:

*Trust No.:

*Contact Person:

*E-mail Address:

*Contact No:

*Income Tax No: If Applicable

*VAT no: If Applicable

*Please list all trustees of the Trust

Title	Full Name	Address	Date of Birth	Contact Details

*DO ANY TRUSTEES MEET THE REQUIREMENTS OF A UNITED STATES PERSON/ENTITY AS DETERMINED BY FATCA?

Yes No

For more information see: za.saxomarkets.com/support/legal-documentation/fatca/

*Please list all beneficiaries of the Trust

Title	Full Name	Address	Date of Birth

*DO ANY BENEFICIARIES MEET THE REQUIREMENTS OF A UNITED STATES PERSON/ENTITY AS DETERMINED BY FATCA?

Yes No

For more information see: za.saxomarkets.com/support/legal-documentation/fatca/

ALL ITEMS WITH * MUST BE PROVIDED.

Part 1 | Trust Details (continued)

***Please indicate how many trades the Trust has undertaken in each of the following products on an execution-only basis during the last 12 months?**

PRODUCTS	NO. OF TRADES
FX Rolling Spot:	_____
Options & Futures:	_____
CFDs:	_____
Financial Spread Bets:	_____
Shares:	_____
ETFs & ETCs:	_____
Gilts & Bonds:	_____

***Please indicate all sources of funds for the account:**

- Share capital
- Trading income
- Investment proceeds & income

Others, please detail: _____

Please provide the most recent (preferably audited) Financial Statements of the Trust.

- Tick to indicate a copy is attached.

TRUST APPLICATION FORM



ALL ITEMS WITH * MUST BE PROVIDED. Complete as necessary and add sheet(s), if required.

Part 2 | Details of Person(s) Authorised to Operate the Account

PERSON NO.1

*Title: Mr Mrs Miss Ms Dr

Other (Please specify):

*Full Name: Name Surname

Identity Number

*Occupation:

*Current residential address:

*Postcode:

*Country:

*Date of Birth: DD / MM / YYYY

*Nationality

*Contact Tel. No.:

*E-mail Address:

*IF YOU HAVE BEEN AT YOUR CURRENT ADDRESS FOR LESS THAN 3 YEARS, PLEASE ALSO PROVIDE YOUR PREVIOUS ADDRESS

*Previous residential address:

*Postcode:

*Country:

PERSON NO.2

*Title: Mr Mrs Miss Ms Dr

Other (Please specify):

*Full Name: Name Surname

Identity Number

*Occupation:

*Current residential address:

*Postcode:

*Country:

*Date of Birth: DD / MM / YYYY

*Nationality

*Contact Tel. No.:

*E-mail Address:

*IF YOU HAVE BEEN AT YOUR CURRENT ADDRESS FOR LESS THAN 3 YEARS, PLEASE ALSO PROVIDE YOUR PREVIOUS ADDRESS

*Previous residential address:

*Postcode:

*Country:

PERSON NO.3

*Title: Mr Mrs Miss Ms Dr

Other (Please specify):

*Full Name: Name Surname

Identity Number

*Occupation:

*Current residential address:

*Postcode:

*Country:

*Date of Birth: DD / MM / YYYY

*Nationality

*Contact Tel. No.:

*E-mail Address:

*IF YOU HAVE BEEN AT YOUR CURRENT ADDRESS FOR LESS THAN 3 YEARS, PLEASE ALSO PROVIDE YOUR PREVIOUS ADDRESS

*Previous residential address:

*Postcode:

*Country:

Part 3 | Trading Knowledge & Experience of the Main Person Operating the Account

Name: _____

(Note: Must be a person named in Part 2)

How long has the person continuously traded financial instruments on an execution only basis whether for the Trust or otherwise?

- Less than 1 year
 1 to 5 years
 More than 5 years

Does the person have any industry recognised qualifications for the type of trading that your entity intends to carry out with us?

- Yes
 No

Does the person work, or has the person worked in the financial sector for at least one year in a professional position which requires knowledge of the nature and risk involved in the type of trading that your entity intends to carry out with us?

- Yes
 No

Part 4 | Data Protection

To comply with the Anti-Money Laundering Regulations, SCMSA is required to collect information and to undertake checks on the identity and residential address of the trustees, beneficiaries and other authorised persons, including accessing and using information held in database or other electronic format through other agencies.

In carrying out electronic verification, other agencies may retain a record of the enquiry and information given to them. SCMSA may also request further supporting documentation to verify these details. The information may be disclosed to law enforcement agencies and other relevant organisations for crime detection and prevention purposes. SCMSA will add data of the individuals (including email details) to the database of Saxo Bank Group which includes entities that are outside SA. A list of entities within the Group can be found on www.saxobank.com. SCMSA may exchange or share information with the firm or person who introduced your Trust to us (hereafter the "Introducing Broker") for proper performance of the services. SCMSA may occasionally contact the trustees and other authorised persons of the Trust by email, telephone or post to give information about products and services offered that are similar or related to the products and services provided or previously provided to the Trust.

ALL ITEMS WITH * MUST BE PROVIDED.

Part 5 | Resolution of Trustees

We certify that at a meeting of the trustees of

_____ TRUST NAME _____

whose registered address is at

_____ ADDRESS OF MASTER WHERE TRUST REGISTERED _____

held on DD / MM / YYYY , the following resolutions were passed:

1. That Saxo Capital Markets South Africa (“SCMSA”) are hereby requested and authorised to open for the Trust such account(s) as may now or from time to time be considered appropriate for purposes of transacting and subscribing to the services and products of SCMSA according to the relevant terms and conditions;
2. That the trustee (s) that sign the application form are hereby authorised to do so for and on behalf of the Trust, do all acts, execute all documents and perform and enter into all agreements necessary or convenient for the purposes of opening and/or operating the account; and
3. That the person(s) on Part 2 of this application form and any additional person(s) so indicated are hereby authorised to give instruction in relation to the account(s).

Part 6 | Declaration

I/We, jointly and severally, declare that:

- I/We hereby request and authorise you to open an account for the Trust;
- I/We have read and understood the nature and the risk of the product(s) that the Trust intends to trade in this account;
- I/We have obtained from the website (www.za.saxomarkets.com), read and understood the following:
 - a) The General Business Terms (including the product risks disclosure detailed in Schedule 1 to these General Business Terms),
 - b) Order Execution Policy,
 - c) Conflict of Interest Policy,
 - d) Commission, Charges & Margin Schedule
- I/We warrant that we have full power and authority to open and operate the account in accordance with the above resolutions, the Trust’s Trust Deed and any other constitutional documents and without breach of any law, restriction or obligation binding on the Trust;
- I/We have provided true, accurate and complete information and authorise you to make any enquiries which you may consider necessary for confirmation of such information and undertake to update SCMSA of any changes to the information provided without delay;
- I/We consent to the Order Execution Policy and for any orders to be executed outside a regulated market or a multilateral trading facility;
- I/We consent for any of unexecuted limit orders not to be made public;
- I/We accept and agree to be bound by the terms provided above and consent to such terms and information including future updates to these be provided to me/us by way of posting on the website indicated above;
- I/We hereby authorise SCMSA to disclose information about my/our account(s) with SCMSA to the Introducing Broker. I/We thus understand and agree that SCMSA is allowed to reveal all information about my/our account(s) at SCMSA to the Introducing Broker and thus, for instance, send copies of any and all transaction notes, account statements etc. to the Introducing Broker. Furthermore SCMSA is allowed to grant to the Introducing Broker a viewing access to my/our account(s) with SCMSA which entails that the Introducing Broker by separate login will have access to view any and all details on my/our account(s) with SCMSA; and
- Each trustee, beneficiary and other authorised person of the Trust consent to the use of their personal information as described on Part 4 of this form.

***Date:**

Full Name: _____	Signature: _____	Trustee
Full Name: _____	Signature: _____	Trustee
Full Name: _____	Signature: _____	Trustee
Full Name: _____	Signature: _____	Trustee