



CAYMAN ISLANDS

STOCK EXCHANGE

Broker Membership Application Package (Process, Forms and Fees)

Application for Broker Membership

A firm applying for membership in the Exchange must submit the application form for broker membership, Form A-1, as well as a Form B-1 for each individual required to apply to the Exchange for authorisation as a registered person. Please see section 3.2 of the Broker Membership Rules for a list of persons required to obtain authorisation as a registered person. Form B-2 should be used instead of Form B-1 by any director or partner applying for authorisation as a registered person.

These Forms, each of which is included in this package of materials, should be sent to the CSX as originals, duly signed together with the initial application fee. Any accompanying information, e.g. CV, proof of registration with another regulator/exchange or securities qualifications, should also be submitted. The CSX reserves the right to ask for proof to substantiate any claim by an applicant.

Application for Remote Broker Membership

A broker dealer firm applying for remote broker membership is not required to have a presence in the Cayman Islands. The applicant firm, however, must be subject to a securities regulatory authority in another jurisdiction with similar regulatory standards to those in the

Cayman Islands. The applicant firm must submit the application form for remote broker membership, Form A-2, as well as a Form B-1 for each individual applying to the Exchange for authorisation as a registered person. A remote broker member must have at least two persons registered with the Exchange.

Forms A-2 and B-1, each of which is included in this package of materials, should be sent to the CSX as originals, duly signed together with the initial application fee. Any accompanying information, e.g. CV, proof of registration with another regulator/exchange or securities qualifications, should also be submitted. The CSX reserves the right to ask for proof to substantiate any claim by an applicant.

Fees (in USD)

	<u>Application</u>	<u>First Annual Fee</u>	<u>Renewal Fee</u>
Broker Member	500	10,000	8,000
Remote Broker Member	500	10,000	8,000

Note that the renewal fee is the annual fee after the first year.

Registered Persons	500		500
--------------------	-----	--	-----

Note that the application fee for authorisation as a registered person is also the annual fee for the first year. The fee is the same whether the registered person is with an ordinary or a remote broker member. A separate fee applies for each person that is registered with the Exchange.



CAYMAN ISLANDS

STOCK EXCHANGE

Broker Membership Rules

Appendix



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 1 - Applicant Details	Information
1. Company name and registered address.	Name: Address: Tel: Fax: E-mail:
2. Contact person responsible for submitting the application.	Name: Job Title: Direct Tel: Direct Fax: E-mail:
3. Has the applicant ever carried on business under another name? If yes provide details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.
4. Is the applicant a member of any other stock exchange? If yes provide details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 1 - Applicant Details	Information
5. Is the applicant authorized to conduct investment business by a recognized regulatory body? If yes provide details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.
6. Has the applicant ever been refused membership of any stock exchange or regulatory body responsible for the authorization or regulation of investment business? If yes, please supply details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 1 - Applicant Details	Information
7. Has the applicant's membership of stock exchange, or authorization or license supplied by a regulatory body responsible for the authorization or regulation of investment business, been terminated by or pursuant to action of that exchange or regulatory body? If yes, please supply details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.
8. Details of the applicant's incorporation and attach a copy of the applicant's certificate of incorporation and memorandum of articles of association.	Nature: Jurisdiction: Date:
9. The applicant's date of financial year end, its current Liquid Capital and its current Net Worth	Date of financial year end: Current Liquid Capital: Current Net Worth:



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 1 - Applicant Details	Information
10. Is the applicant a company?	<input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, provide the following details: Currency of share capital: Amount of authorized share capital: Amount of issued and paid up share capital: Par value (if any) of shares:
11. Is the applicant a firm?	<input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, provide details of the partnership capital:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 1 - Applicant Details	Information
12. Name and registered address of the applicant's auditor.	Name: Address: Tel: Fax: E-mail:
13. Name and registered address of the applicant's bankers.	Name: Address: Tel: Fax: E-mail:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 2 – Applicant Structure	Information
14. Provide a diagram illustrating ownership capital.	Attached on a separate piece of paper.
15. Provide copies of audited financial statements for the applicant and its owners for the past three years, or, if the applicant or its owners have not been in business for that long, for such a shorter period as it has been in existence.	Copies attached.



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 2 – Applicant Structure	Information
16. Provide details of the applicant's beneficial owner(s) where the beneficial owner(s) is an individual. Continue on separate sheet of paper if necessary.	<input type="checkbox"/> The applicant <u>does not</u> have an individual beneficial owner(s). <input type="checkbox"/> The applicant <u>does</u> have an individual beneficial owner(s) and the details are as follows. Name: Occupation: Nationality: Address: Tel: Fax: E-mail: Number and type of shares: Percentage of voting rights:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 2 – Applicant Structure	Information
17. Provide details of the applicant's beneficial owner(s) where the beneficial owner(s) is a company. Continue on separate sheet of paper if necessary.	<p><input type="checkbox"/> The applicant <u>does not</u> have a beneficial owner(s) which is a company.</p> <p><input type="checkbox"/> The applicant <u>does</u> have a beneficial owner(s) which is a company and the details are as follows.</p> <p>Name:</p> <p>Address:</p> <p>Tel:</p> <p>Fax:</p> <p>E-mail:</p> <p>Date of incorporation:</p> <p>Place of incorporation:</p> <p>Number and type of shares:</p> <p>Percentage of voting rights:</p> <p>Principal business:</p> <p><input type="checkbox"/> Quoted</p> <p><input type="checkbox"/> Unquoted</p>



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 2 – Applicant Structure	Information
18. Provide details of the applicants beneficial owner(s) where the beneficial owner(s) is a partnership. Continue on separate sheet of paper if necessary.	<p><input type="checkbox"/> The applicant <u>does not</u> have a beneficial owner(s) which is a partnership.</p> <p><input type="checkbox"/> The applicant <u>does</u> have a beneficial owner(s) which is a partnership and the details are as follows.</p> <p>Name:</p> <p>Address:</p> <p>Tel:</p> <p>Fax:</p> <p>E-mail:</p> <p>Date of creation of partnership</p> <p>Place of creation of partnership:</p> <p>Number and % of shares held:</p> <p>Provide names, addresses, nationalities, occupation and % interest in the partnership for each Partner on a separate piece of paper.</p>



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 2 – Applicant Structure	Information
19. Provide details of the applicant's beneficial owner(s) where the beneficial owner(s) is a trust or settlement. Continue on separate sheet of paper if necessary.	<p><input type="checkbox"/> The applicant <u>does not</u> have a beneficial owner(s) which is a trust or settlement.</p> <p><input type="checkbox"/> The applicant <u>does</u> have a beneficial owner(s) which is a trust or settlement and the details are as follows.</p> <p>Name:</p> <p>Date established:</p> <p>Name of settlor / grantor:</p> <p>Address:</p> <p>Tel:</p> <p>Fax:</p> <p>E-mail:</p> <p>Number and % of shares held:</p> <p>Provide names and addresses for each trustee and beneficiary on a separate piece of paper.</p>



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 2 – Applicant Structure	Information
20. Except in the case of a beneficial owner which is a public company, have any of the beneficial owners of the applicant ever been associated with a company where that company has been the subject of insolvency proceedings, placed in receivership, warned as to future conduct or is the subject of a court order or has been, is or expects to be involved in litigation?	<ul style="list-style-type: none"><input type="checkbox"/> The subject of insolvency proceedings<input type="checkbox"/> Placed in receivership<input type="checkbox"/> Warned as to future conduct<input type="checkbox"/> Publicly criticized<input type="checkbox"/> Is the subject of a court order or has been, is or expects to be involved in litigation. <p>Tick the appropriate boxes and provide further details on a separate piece of paper.</p>



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 2 – Applicant Structure	Information
21. Has any formal investigation ever been carried out into the affairs of the directors of the applicant or of any of the beneficial owners of the applicant or into the affairs of any company with which they or any of them have been associated?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide further details on a separate piece of paper.



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 3 – Operations	Information
22. Describe the arrangements made for custody and settlement of client's securities and handling of client money, detailing names and addresses of custodian and any other third party providers to be used by the applicant for custodian and settlement activities.	



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 3 – Operations	Information
23. Provide the names and addresses of those entities to be used as providers of investment advisory services to the applicant as a broker member.	Name: Address: Tel: Fax: E-mail: Name: Address: Tel: Fax: E-mail:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 3 – Operations	Information
<p>24. Does the applicant intend to engage the services of an agent or agents in relation to the performance of its functions as a broker member?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, provide the following details:</p> <p>Name: Service to be provided: Address:</p> <p>Tel: Fax: E-mail:</p> <p>Name: Service to be provided: Address:</p> <p>Tel: Fax: E-mail:</p> <p>Name: Service to be provided: Address:</p> <p>Tel: Fax: E-mail:</p>



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 4 – Business Activities	Information
<p>25. Indicate the products in which the applicant will deal or engage on or off Exchange (tick all boxes that apply).</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Equities <input type="checkbox"/> Corporate Debt <input type="checkbox"/> Municipal Debt <input type="checkbox"/> Government Debt <input type="checkbox"/> Depository Receipts <input type="checkbox"/> Warrants <input type="checkbox"/> Financial Futures <input type="checkbox"/> Financial Options <input type="checkbox"/> Commodities <input type="checkbox"/> Mutual Funds <input type="checkbox"/> Money Markets & Related Funds <input type="checkbox"/> Interest Rate / Foreign Currency Swaps <input type="checkbox"/> Arbitrage <input type="checkbox"/> Stock Loan / Borrowing <input type="checkbox"/> Repo's & Reverse Repo's
<p>26. Indicate the dealing capacity in which the applicant will deal or engage on or off Exchange (tick all boxes that apply).</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Agent <input type="checkbox"/> Principal



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 4 – Business Activities	Information
27. Indicate the type and number of clients which the applicant will serve (tick all boxes that apply).	<input type="checkbox"/> Private Client Number of: <input type="checkbox"/> Professional Client Number of:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 5 – Business Plan	Information
-------------------------------	--------------------



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 5 – Business Plan	Information
28. Provide a comprehensive statement covering the applicant's first five years of operations and setting out the items described.	<ul style="list-style-type: none">• Nature and scale of the business to be undertaken;• Trading capacity or capacities in which the applicant proposes to act;• Arrangement proposed for the operation of such business;• Aims and objectives of the business;• Sources and nature of expected business;• Systems and procedures proposed for the proper financial accounting, management and administration of the affairs of the applicant and those of its clients;• Internal controls, including security arrangements;• Separation or segregation of assets of clients from those of the applicant;• Capital structure and financing arrangements;• Insurance arrangements;• Intentions to delegate any responsibilities to third parties;• Requirements for premises and personnel.



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 6 – Check List	
29. Ensure that the following are enclosed with the application.	<ul style="list-style-type: none"><input type="checkbox"/> Application fee to become a Broker Member CI\$410 (US\$500)*<input type="checkbox"/> <i>Application fee for each Registered Representative CI\$410 (US\$500)</i><input type="checkbox"/> Copy of two letters of reference<input type="checkbox"/> Copy of Certificate of Incorporation and Memorandum and Articles of Association<input type="checkbox"/> Copy of audited financial statements for the past three financial years.<input type="checkbox"/> Copy of your business plan<input type="checkbox"/> Copy of your organization chart<input type="checkbox"/> Copy of your<input type="checkbox"/> Form B-2 and CV's for all directors or general partners of the applicant<input type="checkbox"/> Form B-1 and CV's for each Registered Representative of the applicant <p>* Initial annual fee of CI\$8,200 (US\$10,000) is payable upon admission as a Broker Member.</p>



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 7 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Name of Applicant	
Signed By	I certify that the contents of this application are true and correct. _____ _____ Person Completing the application form: Name: Date:
Signed By	_____ _____ Director or General Partner: Name: Date:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 7 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Signed By	<hr/> Director or General Partner: Name: Date:
Signed By	<hr/> Director or General Partner: Name: Date:
Signed By	<hr/> Director or General Partner: Name: Date:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX A

APPLICATION FOR MEMBERSHIP – FORM A-1

Part 7 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Signed By	<hr/> Director or General Partner: Name: Date:
Signed By	<hr/> Director or General Partner: Name: Date:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX B

APPLICATION FOR REMOTE MEMBERSHIP – FORM A-2

Part 1 - Applicant Details	Information
30. Company name and registered address.	Name: Address: Tel: Fax: E-mail:
31. Contact person responsible for submitting the application.	Name: Job Title: Direct Tel: Direct Fax: E-mail:
32. Has the applicant ever carried on business under another name? If yes provide details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX B

APPLICATION FOR REMOTE MEMBERSHIP – FORM A-2

Part 1 - Applicant Details	Information
33. Is the applicant a member of any other stock exchange? If yes provide details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.
34. Is the applicant authorized to conduct investment business by a recognized regulatory body? If yes provide details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.
35. Has the applicant ever been refused membership of any stock exchange or regulatory body responsible for the authorization or regulation of investment business? If yes, please supply details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX B

APPLICATION FOR REMOTE MEMBERSHIP – FORM A-2

Part 1 - Applicant Details	Information
36. Has the applicant's membership of stock exchange, or authorization or license supplied by a regulatory body responsible for the authorization or regulation of investment business, been terminated by or pursuant to action of that exchange or regulatory body? If yes, please supply details.	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No.
37. Provide details of at least one nominated person who is able to resolve queries and compliance issues relating to the Exchange.	Name: Job Title: Direct Tel: Direct Fax: E-mail:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX B

APPLICATION FOR REMOTE MEMBERSHIP – FORM A-2

Part 2 – Business Activities	Information
38. Indicate the products in which the applicant will deal on Exchange (tick all boxes that apply).	<input type="checkbox"/> Equities <input type="checkbox"/> Corporate Debt <input type="checkbox"/> Municipal Debt <input type="checkbox"/> Government Debt <input type="checkbox"/> Depository Receipts <input type="checkbox"/> Warrants <input type="checkbox"/> Financial Futures <input type="checkbox"/> Financial Options <input type="checkbox"/> Commodities <input type="checkbox"/> Mutual Funds <input type="checkbox"/> Money Markets & Related Funds <input type="checkbox"/> Interest Rate / Foreign Currency Swaps <input type="checkbox"/> Arbitrage <input type="checkbox"/> Stock Loan / Borrowing <input type="checkbox"/> Repo's & Reverse Repo's
39. Indicate the dealing capacity in which the applicant will deal or engage on Exchange (tick all boxes that apply).	<input type="checkbox"/> Agent <input type="checkbox"/> Principal



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX B

APPLICATION FOR REMOTE MEMBERSHIP – FORM A-2

Part 2 – Business Activities	Information
40. Indicate the type and number of clients which the applicant will serve on Exchange (tick all boxes that apply).	<input type="checkbox"/> Private Client Number of: <input type="checkbox"/> Professional Client Number of:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX B

APPLICATION FOR REMOTE MEMBERSHIP – FORM A-2

Part 3 – Check List	
41. Ensure that the following are enclosed with the application.	<ul style="list-style-type: none"><input type="checkbox"/> Application fee to become a Broker Member CI\$410 (US\$500)*<input type="checkbox"/> <i>CV's and contact details for the Head of Trading, Settlement and Compliance Departments.</i><input type="checkbox"/> A letter of confirmation from the applicant's home regulator that the applicant is authorised to conduct investment business in its home country.<input type="checkbox"/> A letter confirming that the applicant:<ul style="list-style-type: none">• Has, or will arrange for, a technical connection to Bloomberg;• Will organise the training of employees in respect of the Bloomberg system and the Exchange's rules; and• Can settle business conducted on the Exchange. <p>* Initial annual fee of CI\$8,200 (US\$10,000) is payable upon admission as a Broker Member.</p>



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX B

APPLICATION FOR REMOTE MEMBERSHIP – FORM A-2

Part 4 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Name of Applicant	
Signed By	I certify that the contents of this application are true and correct. _____ _____ Person Completing the application form: Name: Date:
Signed By	_____ _____ Director or General Partner: Name: Date:



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX B

APPLICATION FOR REMOTE MEMBERSHIP – FORM A-2

Part 4 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Signed By	<hr/> _____ Director or General Partner: Name: Date:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX C

APPLICATION TO BECOME A REGISTERED PERSON – FORM B-
1

Part 1 - Applicant Details	Information
42. Broker Member:	Name:
43. Applicant details.	Name: Address: Tel: Fax: E-mail:
44. Any previous name's of the applicant.	Name: Name: Name:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX C

APPLICATION TO BECOME A REGISTERED PERSON – FORM B-
1

Part 1 - Applicant Details	Information
45. Any previous addresses in last 5 years.	Address: Address:
46. Birth Details	Date of Birth: Place of Birth: <input type="checkbox"/> Male <input type="checkbox"/> Female
47. Country of citizenship	<input type="checkbox"/> Cayman Islands <input type="checkbox"/> Other _____
48. Job Title and description of applicant's principal duties.	Job Title: Principal duties



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX C

APPLICATION TO BECOME A REGISTERED PERSON – FORM B-
1

Part 1 - Applicant Details	Information
49. Describe the formal education or training the applicant has in securities related activities and, on a separate piece of paper, provide the applicant's curriculum vitae.	Formal Training:
50. Have you ever been licensed as a Registered Representative or similar capacity in any other jurisdiction? If so, give full particulars and attach a copy of any registration form or certificate from such jurisdiction	<input type="checkbox"/> Yes If so, details <input type="checkbox"/> No
51. Do you have any other professional qualifications (i.e. attorney, accountant, etc.) If so, give full particulars	<input type="checkbox"/> Yes If so, the details are: <input type="checkbox"/> No



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX C

APPLICATION TO BECOME A REGISTERED PERSON – FORM B-
1

Part 1 - Applicant Details	Information
52. Are you or have you ever been a director, officer, stockholder, general partner or employee of any other Broker Member or an Associate of any other Broker Member? If yes please state details	<input type="checkbox"/> Yes If so, the details are: <input type="checkbox"/> No
53. Have you ever been disciplined by any stock exchange, securities regulatory body or professional association or been denied admission to or renewal of membership therein? If so, give full details.	<input type="checkbox"/> Yes If so, the details are: <input type="checkbox"/> No



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX C

APPLICATION TO BECOME A REGISTERED PERSON – FORM B-
1

Part 1 - Applicant Details	Information
54. Have you or any company or partnership in which you served as a senior employee ever been declared bankrupt, been convicted of a crime or been sued under any commercial law, securities law, companies law or law concerning fraud? If so, give full details.	<input type="checkbox"/> Yes If so, the details are: <input type="checkbox"/> No



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX C

APPLICATION TO BECOME A REGISTERED PERSON – FORM B-
1

Part 2 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Ensure that the following are enclosed with the application.	<input type="checkbox"/> Application fee to become a Registered Person CI\$410 (US\$500) <input type="checkbox"/> Applicant's CV.
Signed By	I certify that the contents of this application are true and correct. _____ _____ Applicant: Name: Date:
Signed By	_____ _____ Director or General Partner: Name: Date:



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX C

APPLICATION TO BECOME A REGISTERED PERSON – FORM B- 1

Part 2 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Signed By	<hr/> <hr/> Director or General Partner: Name: Date:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX D

APPLICATION TO REGISTER AS A DIRECTOR OR GENERAL
PARTNER OF A BROKER MEMBER – FORM B-2

Part 1 - Applicant Details	Information
55. Broker Member:	Name:
56. Applicant details.	Name: Address: Tel: Fax: E-mail:
57. Any previous name's of the applicant.	Name: Name: Name:



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX D

APPLICATION TO REGISTER AS A DIRECTOR OR GENERAL
PARTNER OF A BROKER MEMBER – FORM B-2

Part 1 - Applicant Details	Information
58. Any previous addresses in last 5 years.	Address: Address:
59. Birth Details	Date of Birth: Place of Birth: <input type="checkbox"/> Male <input type="checkbox"/> Female
60. Country of citizenship	<input type="checkbox"/> Cayman Islands <input type="checkbox"/> Other _____
61. Job Title and description of applicant's principal duties.	Job Title: Principal duties



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX D

APPLICATION TO REGISTER AS A DIRECTOR OR GENERAL
PARTNER OF A BROKER MEMBER – FORM B-2

Part 1 - Applicant Details	Information
62. Describe the formal education or training the applicant has in securities related activities and, on a separate piece of paper, provide the applicant's curriculum vitae.	Formal Training:
63. Have you ever been licensed as a Registered Representative or similar capacity in any other jurisdiction? If so, give full particulars and attach a copy of any registration form or certificate from such jurisdiction	<input type="checkbox"/> Yes If so, details <input type="checkbox"/> No
64. Do you have any other professional qualifications (i.e. attorney, accountant, etc.) If so, give full particulars	<input type="checkbox"/> Yes If so, the details are: <input type="checkbox"/> No



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX D

APPLICATION TO REGISTER AS A DIRECTOR OR GENERAL
PARTNER OF A BROKER MEMBER – FORM B-2

Part 1 - Applicant Details	Information
65. Are you or have you ever been a director, officer, stockholder, general partner or employee of any other Broker Member or an Associate of any other Broker Member? If yes please state details	<input type="checkbox"/> Yes If so, the details are: <input type="checkbox"/> No
66. Have you ever been disciplined by any stock exchange, securities regulatory body or professional association or been denied admission to or renewal of membership therein? If so, give full details.	<input type="checkbox"/> Yes If so, the details are: <input type="checkbox"/> No



CAYMAN ISLANDS
STOCK EXCHANGE

APPENDIX D

APPLICATION TO REGISTER AS A DIRECTOR OR GENERAL
PARTNER OF A BROKER MEMBER – FORM B-2

Part 1 - Applicant Details	Information
67. Have you or any company or partnership in which you served as a senior employee ever been declared bankrupt, been convicted of a crime or been sued under any commercial law, securities law, companies law or law concerning fraud? If so, give full details.	<input type="checkbox"/> Yes If so, the details are: <input type="checkbox"/> No



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX D

APPLICATION TO REGISTER AS A DIRECTOR OR GENERAL PARTNER OF A BROKER MEMBER – FORM B-2

Part 2 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Ensure that the following are enclosed with the application.	<input type="checkbox"/> Application fee to become a Registered Person CI\$410 (US\$500) <input type="checkbox"/> Applicant's CV.
Signed By	I certify that the contents of this application are true and correct. _____ Applicant: Name: Date:
Signed By	_____ Director or General Partner: Name: Date:



CAYMAN ISLANDS **STOCK EXCHANGE**

APPENDIX D

APPLICATION TO REGISTER AS A DIRECTOR OR GENERAL PARTNER OF A BROKER MEMBER – FORM B-2

Part 2 – Sign Off	IMPORTANT An applicant for membership authorizes the Exchange to obtain information from and pass information to, any authority, agency or body having responsibility for the supervision of financial services or for law enforcement, whether in the Cayman Islands or elsewhere.
Signed By	<hr/> <hr/> Director or General Partner: Name: Date: