



ACCOUNT APPLICATION FORM

Please check all the relevant boxes and fill out each field using BLOCK capital letters. For faster processing, ensure that the form is fully and correctly completed.

I. Type of Account

Individual

Joint Account

II. Account Owner Information – Primary Account Owner

Mr. Mrs. Ms. Dr.

First Name	Street Address	
Middle Name		
Last Name	Postal Code	City
Date of Birth	Country	

Work phone	Ext.	E-Mail Address
Mobile phone		

Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed	<input type="checkbox"/> Number of dependents _____
Employment Status	<input type="checkbox"/> Employed	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Not-employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Student <input type="checkbox"/> Other

II-I. Citizenship – Primary Account Owner

Are you a Citizen of Japan (日本)?

Yes

Please contact our Trading Department to apply for a domestic account.

No

Complete section below.

Non-Japanese (日本) Citizens

Country of Citizenship _____

Are you a permanent resident of Japan (日本)?

Yes

No

If you plan to be a resident of Japan (日本) for 183 days or more, please contact our Trading Department to apply for a domestic account.

III. Account Owner Information – Joint Account Owner (if applicable)

Mr. Mrs. Ms. Dr.

First Name	Street Address	
Middle Name		
Last Name	Postal Code	City
Date of Birth	Country	
Work Phone	E-Mail Address	
Mobile Phone		
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Number of dependents _____	
Employment Status	<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Not-employed <input type="checkbox"/> Retired <input type="checkbox"/> Student <input type="checkbox"/> Other	

III-I. Citizenship – Joint Account Owner

Are you a Citizen of Japan (日本)?

YES

Please contact our Trading Department to apply for a domestic account.

NO

Complete section below.

Non-Japanese (日本) Citizens

Country of Citizenship _____

Are you a permanent resident of Japan (日本)?

Yes

No

If you plan to be a resident of Japan (日本) for 183 days or more, please contact our Trading Department to apply for a domestic account.

IV. Financial Information

Investment Knowledge	<input type="checkbox"/> None <input type="checkbox"/> Limited <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Investment Experience	<input type="checkbox"/> None <input type="checkbox"/> Limited <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Annual Income (from all sources)	<input type="checkbox"/> \$25,000-\$49,999 <input type="checkbox"/> \$50,000-\$99,999 <input type="checkbox"/> \$100,000-\$499,999 <input type="checkbox"/> \$500,000-\$999,999 <input type="checkbox"/> \$1,000,000-\$1,499,999 <input type="checkbox"/> \$1,500,000+
Net Worth (excluding your residence)	<input type="checkbox"/> \$25,000-\$49,999 <input type="checkbox"/> \$50,000-\$99,999 <input type="checkbox"/> \$100,000-\$499,999 <input type="checkbox"/> \$500,000-\$999,999 <input type="checkbox"/> \$1,000,000-\$1,499,999 <input type="checkbox"/> \$1,500,000+
Liquid Net Worth	<input type="checkbox"/> \$25,000-\$49,999 <input type="checkbox"/> \$50,000-\$99,999 <input type="checkbox"/> \$100,000-\$499,999 <input type="checkbox"/> \$500,000-\$999,999 <input type="checkbox"/> \$1,000,000-\$1,499,999 <input type="checkbox"/> \$1,500,000+

V. Financial Activities

For joined accounts, please include combined amounts.

Securities	<input type="checkbox"/> 0 – 9	<input type="checkbox"/> 10 – 14	<input type="checkbox"/> 15 – 24	<input type="checkbox"/> 25 – 74	<input type="checkbox"/> 75+
Currencies	<input type="checkbox"/> 0 – 9	<input type="checkbox"/> 10 – 14	<input type="checkbox"/> 15 – 24	<input type="checkbox"/> 25 – 74	<input type="checkbox"/> 75+
Commodities	<input type="checkbox"/> 0 – 9	<input type="checkbox"/> 10 – 14	<input type="checkbox"/> 15 – 24	<input type="checkbox"/> 25 – 74	<input type="checkbox"/> 75+
Options	<input type="checkbox"/> 0 – 9	<input type="checkbox"/> 10 – 14	<input type="checkbox"/> 15 – 24	<input type="checkbox"/> 25 – 74	<input type="checkbox"/> 75+
Futures	<input type="checkbox"/> 0 – 9	<input type="checkbox"/> 10 – 14	<input type="checkbox"/> 15 – 24	<input type="checkbox"/> 25 – 74	<input type="checkbox"/> 75+
Average transactions size	<input type="checkbox"/> 0-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$25,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000+

VI. Investment objectives

Review the investment before making your selection below:

Income	Seeking current cash flow in exchange for a reduction of potential capital appreciation.
Hedging	Seeking to reduce the risk of adverse price movements in a security.
Speculation	Seeking a capital appreciation. This objective involves investments that can have significant fluctuations in value. It involves a high level of risk, which can lead to a significant loss in principal.

In order to determine your trading level, we consider several factors, including your trading experience and financial information. Checking "Speculation" below does not guarantee that you will be approved for all trading levels.

Investment objective (check only one)	<input type="checkbox"/> Income and hedging <input type="checkbox"/> Hedging and speculation <input type="checkbox"/> Income and speculation <input type="checkbox"/> Speculation
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VII. Account maintenance instructions

Check the box representing how would you like us to handle the following:

Dividends	<input type="checkbox"/> Hold	<input type="checkbox"/> Transfer if requested	<input type="checkbox"/> Other _____
Securities	<input type="checkbox"/> Hold	<input type="checkbox"/> Transfer if requested	<input type="checkbox"/> Other _____
Proceeds of sale	<input type="checkbox"/> Hold	<input type="checkbox"/> Transfer if requested	<input type="checkbox"/> Other _____

Send all correspondence to:	
<input type="checkbox"/> E-Mail:	<input type="checkbox"/> Fax:

VIII. Signature(s) of all Account Owner(s)

By applying for authorization to trade and signing this Application, I/We acknowledge that I/We have read and agreed the Daiju Commodity Markets Terms and Conditions as currently set on www.daiju-cm.com.

I/We represent that I/We are aware of the inherent risks of option trading and that I/We are financially able to bear such risks and withstand trading losses, including the loss of my/our entire investment. I/We understand that Daiju Commodity Markets may periodically request new financial information and review my authorization to trade.

My/Our Account will be handled in accordance with the rules of the applicable exchange and/or regulatory agencies, and I/We agree to conduct activity in My/Our Account in accordance with such rules.

I/We are of legal age to enter into contract. I/We acknowledge that Daiju Commodity Markets does not provide tax or legal advice.

I/We understand that Daiju Commodity Markets will not provide My/Our name to issuers of any financial services, unless I/We notify Daiju Commodity Markets to do so.

I/We agree to pay Daiju Commodity Markets a 2% commission of net profits generated by trading in My/Our account.

I/We declare that the answers given, whether in My/Our handwriting or not, are true and complete to the best of My/Our knowledge and belief.

I/We also agree to inform Daiju Commodity Markets of any change of name, change of address, etc. that may occur during the life of this policy.

Primary Account Owner Name (Printed Name)

Joint Account Owner Name (Printed Name)

Date

Primary Account Owner Signature

Date

Joint Account Owner Signature