

**TISA Exchange Limited (TeX)**

Registration Form

This form should be completed in conjunction with the ‘Notes to the Contract Club Joining Form and Registration Form’ which

accompanies this form. Further copies of the notes can be obtained from [www.tisaexchange.co.uk](http://www.tisaexchange.co.uk).

1. **DETAILS OF ENTITY/BRAND TO APPEAR ON TeX REGISTER (the ‘Applicant’)**

Name:

Type of entity: Company/Partnership/LLP/Individual/Other:

Brand name (if relevant):

Address:

Financial services firm reference or equivalent EEA authority number:

1. **JOINING FEE**

A joining fee is payable only once in respect of all applicants in a corporate group. If a joining fee has already been paid in respect of the Applicant’s corporate group, the Applicant can tick the second box and complete the section below identifying the group of which they are part and providing supporting evidence.

Joining Form attached

Applicant is a subsidiary undertaking of the undertaking identified below, so no further joining fee is payable

Name: TeX reference number:

Confirmation of group relationship attached: Yes: No:

TeX reference number:

Brand name (if relevant):

Entity Name:

Financial services firm reference or equivalent EEA authority number:

Brand name (if relevant):

1. **MEMBER CATEGORY**

Service Provider: Asset Manager: Multi-Role Member: Pension Provider:

Membership Types will be explained by TeX during the application process and can also be found in the notes to these forms.

1. **REGULATORY INFORMATION**

Financial services firm reference number or equivalent EEA authority number (if relevant):

Agreeing to carry on a regulated activity: Yes: No:

Arranging (bringing about) deals in investments: Yes: No:

Arranging safeguarding and administration of assets: Yes: No:

Safeguarding and administration of assets (without arranging): Yes: No:

Managing a UCITS Yes: No:

Managing an authorised AIF Yes: No:

Managing an unauthorised AIF Yes: No:

If registering as a Pension Provider and not shown on the Financial Services Firm Register:

Details of membership of any alternative body / affiliations:

 Reference attached from the Chairman of the Trustees of any scheme for which the Applicant acts as administrator

 *Please note applications for Pension Providers not shown on the Financial Services Firm register may take additional time to*

 *process while membership requirements are validated*

1. **FURTHER INFORMATION ABOUT APPLICANT**

VAT registration number:

Nominee name format:

Applicant elects to communicate and process transfers:

1. manually only: Yes: No:
2. manually and electronically: Yes: No:

Electronic solution provider (if relevant):

Transfer notes:

**Mandatory information for electronic transfers:** Information relating to BICs can be provided by your solution provider

 Business entity BIC:

SWIFT DN:

Additional electronic systems

address information (if relevant):

Market Practice Version Supported:

**Applicant elects to communicate & process transfers per account type as follows:**

Electronic profile (Ceding Party)

manually only manually and electronically

ISA

GIA

Pension

Electronic profile (Acquiring Party)

manually only manually and electronically

ISA

GIA

Pension

1. **CONTACT INFORMATION**

All email addresses in this Section 6 must be continuously monitored. It is important to note that the first and second tier representative must not be the same individual.

**Relationship Manager** - The person who manages the relationship with TeX.

Name:

Role:

Email:

Telephone: Fax:

**Escalation Representatives for Dispute Resolution etc.**

**First Tier (Operational Team)** - The person to whom TeX/other members should refer operational matters.

Tick here if the Relationship Manager fulfils this role. If not, complete details below.

Name:

Role:

Email:

Telephone: Fax:

**Second Tier (Senior Management)** - The person to whom TeX/other members should refer unresolved or escalation issues.

Tick here if the Relationship Manager fulfils this role. If not, complete details below.

Name:

Role:

Email:

Telephone: Fax:

**Nominated Corporate Representative (unless Member is an individual)**

Tick here if the Relationship Manager fulfils this role. If not, complete details below.

Name:

Role:

Email:

Telephone: Fax:

**BAU contact** - The person to whom TeX/other members should refer business as usual matters

Tick here if the Relationship Manager fulfils this role. If not, complete details below.

Name:

Role:

Email:

Telephone: Fax:

1. **ANNUAL MEMBERSHIP FEE**

If the Applicant is part of a corporate group with two or more Marketing Groups which are members of TeX of the same category, only ONE Annual Membership Fee is required in respect of each Marketing Group.

Tick here if an Annual Membership Fee for this category has already been paid in respect of another entity in the same Marketing Group and identify the relevant entity/ies below:

Name:

TeX Membership Number for the company named above:

If no Annual Membership Fee for this category has been paid by another member of the same Marketing Group please complete the details below:

Address to which invoice should be sent:

For the attention of:

Purchase Order Reference Number (if required):

1. **OPTIONAL**

If the Applicant appoints an agent who will deal with TeX and with other members of TeX in relation to TeX complete the details below.

**Applicant’s agent for service:**

Name:

Address:

Contact name:

Contact role:

Contact e-mail:

Contact telephone: Contact fax:

Scope of agent’s authority:

Note: If no limits are specified, TeX and other members are entitled to assume the agent has unlimited authority to act on behalf of, and bind, the Applicant in relation to any and all matters involving TeX and/or the Contract Club. Use Section 10 (Additional Information) if necessary.

1. **IF APPLICANT’S OFFICE IS OUTSIDE THE UNITED KINGDOM**

**Applicant’s UK agent for service:**

Name:

Address:

Contact name:

Contact role:

Contact e-mail:

Contact telephone: Contact fax:

**10. ADDITIONAL INFORMATION (if required)**

Include here any additional information for which there is insufficient space in any other Section of this Registration Form e.g. if you require copies of any or all communications to be sent to a second contact (if so, please provide details of the name/role, email, telephone and fax for that second contact) or contact details for any additional representative(s) responsible for day to day technical and/or operational matters in relation to TeX or further details as to scope of any agent’s authority (see Section 8).

Note that no Applicant may specify any additional provisions, conditions or limitations on the terms of the Membership Agreement and any additional provisions, conditions and/or limitations which are specified by any Applicant will be void and of no effect.

**Additional TeX Register access:**

Provide details below of any additional contact(s) requiring access to the TeX register not named in Sections 6 and/or 10.

Name:

Role:

Email:

Telephone: Fax:

1. **DECLARATION**

The Applicant applies to become a member of TISA Exchange Limited (in the class specified in Section 3), and

(a) confirms that it has read the terms of the Membership Agreement [comprising this Registration Form, the Joining Fee Form referred to in Section 2, the Articles of Association of TISA Exchange Limited, the Contract Terms, the By-laws, the Glossary, the TISA Re-registration Service Level Agreement, the Competition Policy, the Whistle-Blowing Policy and the Privacy Policy];

(b) agrees with TISA Exchange Limited that on admission as a Member of TISA Exchange Limited it will comply with all the terms of the Membership Agreement;

(c) subject only to admission of the Applicant as a member of TISA Exchange Limited, irrevocably appoints TISA Exchange Limited as its agent for the limited purpose of agreeing the terms of the Membership Agreement with each other member of TISA Exchange Limited from time to time;

(d) undertakes to notify TISA Exchange Limited of any changes to the information in this Registration Form as soon as possible but in any event within two Business Days of the change occurring; and

(e) understands that membership of TISA Exchange Limited is subject to payment of a joining fee and an annual membership fee in respect of each member (where relevant on a group basis).

The individual completing this Registration Form declares that he/she is authorised by the Applicant to make this application and has consent to disclose all personal data provided during the application process, which data will be used by TISA Exchange Limited in accordance with the terms of the Privacy Policy (whether or not the application to become a Member is accepted).

Signature:

Duly authorised for and on behalf of the Applicant.

Name of signatory:

Job title of signatory:

E-mail address of signatory:

Telephone number of signatory:

Date:

**TeX Office Use Only**

Date received: TeX Membership Reference:

If established in the UK, does the Applicant have the required permission(s)?

If established in the EEA, does the Applicant have equivalent passported permissions?

Does the Applicant satisfy any other criteria for all activities and permissions referred to in the Registration Form?

Notes:

**TeX Office Use Only**

Date received:

TeX reference number:

Notes: