

# Investment Application: Individual - Joint



We require the following Investment Account(s) and/or services:-

## CUSTODIAL SERVICES:

USD  GBP  CAD  EURO

Other, please specify currency \_\_\_\_\_

## SECURITY TRADING:

### Equities:

USD  GBP  CAD  EURO

Other, please specify currency \_\_\_\_\_

### Fixed Income:

USD  GBP  CAD  EURO

Other, please specify currency \_\_\_\_\_

### Derivatives:

USD  GBP  CAD  EURO

Other, please specify currency \_\_\_\_\_

### Mutual Funds:

USD  GBP  CAD  EURO

Other, please specify currency \_\_\_\_\_

### Hedge Funds:

USD  GBP  CAD  EURO

Other, please specify currency \_\_\_\_\_

## COMMODITIES:

List commodity (ies) to invest in: \_\_\_\_\_

## FOREIGN EXCHANGE TRADE:

List currency pairs for trading: \_\_\_\_\_

PIN CODE/PASSWORD (Telephone Account(s) Enquiry)  
(Please complete when mailing original application)

(Four to six characters: letters, numbers or combination of both)

We have received, read, understood and accepted the Terms and Conditions of the Customer Agreement and/or Investment Agreement in the "Leading The Way In International Banking" Brochure.

We agree to be bound thereby, and acknowledge that same may be amended by you from time to time.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

## BENEFICIAL OWNERSHIP SECTION

Beneficial Holder #1—Surname and First Names:

\_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

Are you a U.S. National?  Yes  No

If yes, please provide a copy of your U.S. Passport or Green Card as appropriate

Tax Identification/Social Security Number \_\_\_\_\_

Please list ALL countries of Citizenship (if different from above)  
(Please provide copies of related Passport(s) or other form of  
Citizenship). If none, please state.

\_\_\_\_\_

Beneficial Holder #2—Surname and First Names:

\_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

Are you a U.S. National?  Yes  No

If yes, please provide a copy of your U.S. Passport or Green Card as appropriate

Tax Identification/Social Security Number \_\_\_\_\_

Please list ALL countries of Citizenship (if different from above)  
(Please provide copies of related Passport(s) or other form of  
Citizenship). If none, please state.

\_\_\_\_\_

**Beneficial Holder #3—Surname and First Names:**

\_\_\_\_\_

Residential Address: \_\_\_\_\_

Are you a U.S. National?  Yes  No

**If yes, please provide a copy of your U.S. Passport or Green Card as appropriate**

Tax Identification/Social Security Number \_\_\_\_\_

Please list **ALL** countries of Citizenship (if different from above)  
**(Please provide copies of related Passport(s) or other form of Citizenship). If none, please state.**

\_\_\_\_\_

**ACCOUNT HOLDER INFORMATION SECTION**

**Account Holder #1—Surname and First Names:**

\_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

Passport Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Country of Residence \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you a U.S. National?  Yes  No

**If yes, please provide a copy of your U.S. Passport or Green Card as appropriate**

Tax Identification/Social Security Number \_\_\_\_\_

Please list **ALL** countries of Citizenship (if different from above)  
**(Please provide copies of related Passport(s) or other form of Citizenship). If none, please state.**

\_\_\_\_\_

\_\_\_\_\_

**Account Holder #2—Surname and First Names:**

\_\_\_\_\_

Residential Address: \_\_\_\_\_

Are you a U.S. National?  Yes  No

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

Passport Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Country of Residence \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you a U.S. National?  Yes  No

**If yes, please provide a copy of your U.S. Passport or Green Card as appropriate**

Tax Identification/Social Security Number \_\_\_\_\_

Please list **ALL** countries of Citizenship (if different from above)  
**(Please provide copies of related Passport(s) or other form of Citizenship). If none, please state.**

**Account Holder #3—Surname and First Names:**

\_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

Passport Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Country of Residence \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you a U.S. National?  Yes  No

**If yes, please provide a copy of your U.S. Passport or Green Card as appropriate**

Tax Identification/Social Security Number \_\_\_\_\_

Please list **ALL** countries of Citizenship (if different from above)  
**(Please provide copies of related Passport(s) or other form of Citizenship). If none, please state.**

**JOINT ACCOUNT AGREEMENT**

We, the undersigned, request and authorize you to open investment account(s) in the names of:-

\_\_\_\_\_

*(Name of Customers)*

---

\_\_\_\_\_

*(Name of Customers)*

---

\_\_\_\_\_

*(Name of Customers)*

---

\_\_\_\_\_

*(Name of Customers)*

---

\_\_\_\_\_

*(Name of Customers)*

and to honour withdrawals of any and all investment funds, and accept instructions in relations to the account(s), providing such withdrawals or instruction is signed by: **(Tick as appropriate)**

**either**      **both**      **any one**      **any two**      **all**

\_\_\_\_\_

*(initial by all parties)*

This authority is to remain in force until:

**either**      **both**      **any one**      **any two**      **all**

\_\_\_\_\_

*(initial by all parties)*

shall have expressly revoked it by a notice in writing. It shall not be revoked by the death of any of us, whereafter the signature of the survivors may be accepted as a sufficient discharge for any balance on this account or any part of such balance. We also confirm that we have read, understood and accepted all of the Terms and Conditions of the Customer Agreement and/or Investment Agreement in the "Leading The Way In International Banking" Brochure. We agree to be bound thereby, and acknowledge that same may be amended by you from time to time. We confirm that we are non-residents of Antigua & Barbuda. We confirm that we are the beneficial owners of this account.

Referral Source: \_\_\_\_\_

\_\_\_\_\_  
**(Please list the name of who (Individual or Company) referred you to the Bank**

**CLIENT AGREEMENT**

The Client hereby acknowledges and agrees:

1. That responsibility for investment decisions as well as for any profit(s) or loss(es) that may result to hereby indemnify Global Bank of Commerce Limited, its employees, agents, or related companies from any and all law suits, proceedings, actions claims, demands, costs and expenses whatsoever which may arise out of investment decisions and/or transactions.

2. That Global Bank of Commerce Limited does not guarantee the future performance of the Investment Account or any specific level of performance, the successes of any investment recommendation or strategy that Advisor(s) may recommend and/or take for the Investment Account. The Client understands that investment recommendations and/ or decisions for the Account are subject to various markets, currency, economic, political and business risks, and that those investment recommendations and/or decisions will not always be profitable.

**Signature of Account Holder #1**  
*(Use Black Ball Point Pen for signature and sign inside and away from the edges of the box)*

**Signature of Account Holder #2**  
*(Use Black Ball Point Pen for signature and sign inside and away from the edges of the box)*

**Signature of Account Holder #3**  
*(Use Black Ball Point Pen for signature and sign inside and away from the edges of the box)*