



(The information contained in this form shall be used for the express purpose of managing customer accounts and shall not be sold or distributed to third parties.)

**CUSTOMER INFORMATION**

Customer information must be completed for each participant in the account, individually, jointly, by all general partners and by the corporate officers authorized to make trading decisions for the account. For the purpose of this document, the term “Customer” always refers to the entity for which this application has been made, regardless of legal description.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

If you are acting on behalf of an entity other than an individual please provide the name of that entity:

Entity: \_\_\_\_\_  
\* legal entities must complete and return the applicable resolution form.

Type of Entity:  Corporation  Partnership  Trust  Other (please specify) \_\_\_\_\_

Industry:  Basic Materials  Consumer Goods  Financial  Healthcare  Industrial Goods  Services  Technology  
 Utilities  Other (please specify) \_\_\_\_\_

Description of products/services: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_

U.S. customers: Social Security or Tax ID number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth (mm/dd/yyyy): \_\_\_\_\_

Citizenship: U.S. Citizen:  Yes  No. If No, what country? \_\_\_\_\_

Employment Status:  Employed  Self-Employed  Retired  Unemployed  
Position: \_\_\_\_\_

Employer’s Name: \_\_\_\_\_

If you are self-employed, select your industry:

- Basic Materials  Consumer Goods  Financial  Healthcare  Industrial Goods  Services  Technology  Utilities
- Other (please specify) \_\_\_\_\_

and describe your products/services: \_\_\_\_\_

I am:  I am not a Politically Exposed Person (“PEP”). A PEP is an individual who holds or has ever held one of the following offices or positions: head of state or government; member of the executive council of government or member of a legislature; deputy minister (or equivalent); ambassador or an ambassador’s attaché or counsellor; military general (or higher rank); president of a state owned company or bank; head of a government agency; judge; or leader or president of a political party in a legislature. A PEP also includes close associates and immediate family members (mother or father; child; spouse or common law-partner; spouse’s or common-law partner’s mother or father and brother, sister; any other child of the individual’s mother or father) of the PEP.

Primary Account Currency:  U.S. Dollar  Euro  Canadian Dollar (CAD)  Swiss Franc (CHF)  Great Britain Pound (GBP)  
 Japanese Yen (JPY)  Australian Dollar (AUD)  Singapore Dollar (SGD)  Hong Kong Dollar (HKD)

Select the starting leverage for your account. The default is 20:1 and you may change this at anytime.  
 10:1  20:1  30:1  40:1  50:1

**LOGIN INFORMATION**

Your Preferred Username: \_\_\_\_\_ (Please do not use spaces or punctuation.)

Do you want your username displayed publicly (for example, in OANDA’s public contests)?  Yes  No

OANDA Corporation – NFA ID 0325821  
fxTrade Customer Application Form

Your password: \_\_\_\_\_ (Use 8-20 alphanumeric numbers. For your protection, update this later.)

Security question (select one and provide answer):

- Mother's maiden name:
- City/town where parents met:
- Name of first pet:
- Name of childhood best friend:
- Name of first boss:
- Name of favorite teacher:
- Number of siblings:
- Shoe size:

Answer: \_\_\_\_\_

**THE INFORMATION BELOW MUST BE FILLED OUT IN FULL**

Do you have experience (check all that apply):

Trading securities?  Yes  No # of years? \_\_\_\_\_ Trading equity options?  Yes  No # of years? \_\_\_\_\_

Trading futures?  Yes  No # of years? \_\_\_\_\_ Trading commodities?  Yes  No # of years? \_\_\_\_\_

Trading currencies?  Yes  No # of years? \_\_\_\_\_

What is your total estimated annual income (estimated annual revenue if applicant is an entity)? USD \_\_\_\_\_

What is your total net worth (total assets less total liabilities if applicant is an entity)? USD \_\_\_\_\_

Have you ever declared bankruptcy?  Yes  No

If Yes, provide date and details \_\_\_\_\_

Will any other person(s) have financial interest in this account?  Yes  No

If Yes, please provide name(s): \_\_\_\_\_

Are you, your spouse, or any relative in the same household, an employee, principal, owner of over 10% equity interest, or associated person of a retail forex counterparty?  Yes  No

If Yes, please explain: \_\_\_\_\_

Do you operate a commodity pool, a pooled investment vehicle, or act as an intermediary accepting funds from others?

Yes  No If Yes, please explain: \_\_\_\_\_

What is your trading objective:  To Hedge other instruments  Risk Management  To make Profit

Where did you hear about OANDA? \_\_\_\_\_

**AUTHORIZATION**

**The undersigned hereby attest(s) and certifies to be a sophisticated financial institution and/or sophisticated participant and attest(s) that the above information is complete and accurate and hereby authorizes OANDA to verify any information submitted in accordance with OANDA's Privacy Policy.**

Please include copies of 1 government-issued photo ID , 1 document confirming your address (current within 3 months) and completed Acknowledgement & Agreement form with this application.

Agreed and accepted:

\_\_\_\_\_  
Print Customer Name

\_\_\_\_\_  
Signature

Title: \_\_\_\_\_

Date: \_\_\_\_\_