



# JOINT ACCOUNT APPLICATION

Please call or email our Customer Support at [service@mgforex.com](mailto:service@mgforex.com) if you need help with this application.

Submit this form only if the Joint Account is NOT to be opened for a registered or legal partnership. Specifically, this form is designed for joint accounts, when the other tenant(s) is a Spouse, family member, or a friend.

The information provided in this application form will not be shared, sold, or otherwise divulged to anyone outside MG Corp. except for government authorities, regulators, auditing firms, and other institutions with oversight functions with respect to Money Garden Corp.

Account's Information: To be completed by all members of the account and others 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.

\*Omnibus accounts will need special approval to trade. Providing false information is a breach of your obligation to Money Garden Corp. and against the law. Persons presenting false information may face prosecution by law enforcement agencies.

**PLEASE BE SURE TO PRINT LEGIBLY AND ANSWER EVERY QUESTION COMPLETELY:**

## I. ACCOUNT OPENING INFORMATION

ACCOUNT TITLE: \_\_\_\_\_

### TENANT #1:

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address (IN ALL CAPS): \_\_\_\_\_ Male  Female

Street Address: \_\_\_\_\_ Apartment/Suite: \_\_\_\_\_

City: \_\_\_\_\_ State/Province/Land: \_\_\_\_\_

Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone #1: \_\_\_\_\_ When is the best local time to call? \_\_\_\_\_

Telephone #2: \_\_\_\_\_ Fax #: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Number of Dependents: \_\_\_\_\_

U.S. Citizen: Yes  No  (If no, what country?): \_\_\_\_\_

(For US residents or US citizens) Social Security # or Tax ID: \_\_\_\_\_

(For non-US residents or non-US citizens) Passport number or Country ID: \_\_\_\_\_

If you do not wish to receive periodic email updates from MG Financial Group, please check this box:   
Clients should keep in mind that discontinuing may prevent them from receiving important announcements regarding their MG accounts.

**Please let us know if your contact information including home address, phone number or email changes.**

Employer's Name: \_\_\_\_\_ # of Years there: \_\_\_\_\_

Nature of Business: \_\_\_\_\_ Position: \_\_\_\_\_ Telephone: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

If less than 2 years employment at current occupation, please detail previous employment history:

Employer's Name: \_\_\_\_\_ # of Years there: \_\_\_\_\_

Nature of Business: \_\_\_\_\_ Position: \_\_\_\_\_ Telephone: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

1. Do you have experience trading:

	Yes	# of Years?	No		Yes	# of Years?	No
Securities	<input type="checkbox"/>	_____	<input type="checkbox"/>	Options on Futures	<input type="checkbox"/>	_____	<input type="checkbox"/>
Stock Options	<input type="checkbox"/>	_____	<input type="checkbox"/>	Currencies	<input type="checkbox"/>	_____	<input type="checkbox"/>
Commodity Futures	<input type="checkbox"/>	_____	<input type="checkbox"/>	Currency Futures	<input type="checkbox"/>	_____	<input type="checkbox"/>

2. How did you hear about us? (Please be specific): \_\_\_\_\_

If you were referred to us, please provide the name of Referring Broker: \_\_\_\_\_

3. What is your total Estimated Annual Income? \$ \_\_\_\_\_

4. Net worth (Assets Minus Liabilities) \$ \_\_\_\_\_

5. Liquid Assets (Assets that can be quickly converted to Cash) \$

6. Estimated Initial Deposit \$

*\*Omnibus Accounts can receive approval if the Account Manager is registered and operates within the guidelines of the National Futures Association (NFA).*

*Add copies of applicable pages for additional Tenants.*

Page 1    080603    Initials X: \_\_\_\_\_    Initials X: \_\_\_\_\_    Date X: \_\_\_\_\_



# JOINT ACCOUNT APPLICATION

Clients can earn rollover credits on a margin of 1% (or a \$2000 per unit margin) as long as they are long the currency with the higher interest rate. Please indicate your margin preference below:

Percentage Based \_\_\_\_\_ % (if other than 1%) OR  Dollars Per Unit

If you choose Dollar Per Unit Margin, then your Required Margin will be determined by the Account Equity level. For details, please review the margin section on MG's website.

7. Have you ever declared bankruptcy? Yes  No

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

8. **Bank Information:** Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Person to contact: \_\_\_\_\_

Telephone: \_\_\_\_\_

Account in the name of: \_\_\_\_\_

ABA or SWIFT # (if applicable): \_\_\_\_\_

Your Account Number: \_\_\_\_\_

9. Will any person(s) other than the account holder(s) have a financial interest in this account or provide a guarantee for it? Yes  No

If Yes, please Name: \_\_\_\_\_

10. Will any person other than the account holder(s) control, manage, or direct the trading in this account?

Yes  No

If Yes, please fill out Power of Attorney Risk Disclosure (Supplemental Form).

11. Is this an omnibus account? Yes  No

12a. Do you have or have you ever had a live account(s) with MG Co.? Yes  No

If Yes, provide live account User name: \_\_\_\_\_

12b. Do you have or have you ever had a demo account(s) with MG Co.? Yes  No

If Yes, provide demo account User name: \_\_\_\_\_

If lost, or misplaced, please confirm your MG demo account by marking an "X" in this box: [ ]

13. Are you or any person having interest in this account, a member of any commodity exchange or affiliated with any other securities or commodity brokerage firm? Yes  No

If Yes, please list: \_\_\_\_\_

14. Please specify any special arrangements, agreements or promises made between you, or any person having interest in this account, and the broker(s) or designated trading agent who is opening, or will be trading this account. (Use additional sheet if needed)

15. Have you ever made an oral or written complaint regarding a past commodity futures, currency or securities account or do you have pending litigation, disputed accounts, or other unresolved matters with any currency Interbank, futures or securities broker(s)? Yes  No

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

16. Customer currently has interest in additional account(s) held by MG Co. or its successors, assigns or affiliates other financial institution recognized by MG Co.? Yes  No

If Yes, list the account number(s) and institution(s): \_\_\_\_\_

17. The Monthly Statements and Daily Trade Confirmations will be sent to one email address. The address can belong to either tenant. Please select one of the following options:

[ ] Customer agrees to receive electronic transmissions of Internet-hyperlinks to password-protected monthly statements and daily trade confirmations FREE OF CHARGE, to the following email address: \_\_\_\_\_

[ ] Customer agrees to have debited from his/her Trading Account \$25 for every Quarterly Statement, \$10 for every Monthly Statement and \$3 for every Daily Trade Confirmation delivered by post mail.

**18. Each tenant should submit one form of photo identification (ID) with his/her signature to complete this application.** Credit Card with a photograph is NOT an acceptable form of Photo ID.

19. If the account is joining an IMA, it is the Tenants' responsibility to perform necessary due diligence to find qualifications of the Designated Trading Agent and to make sure that all arrangements are discussed and clearly understood prior to any trading activity.

Page 2 080603 Initials X: \_\_\_\_\_ Initials X: \_\_\_\_\_ Date X: \_\_\_\_\_



# JOINT ACCOUNT APPLICATION

**TENANT #2:**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address (IN ALL CAPS): \_\_\_\_\_ Male  Female 

Street Address: \_\_\_\_\_ Apartment/Suite: \_\_\_\_\_

City: \_\_\_\_\_ State/Province/Land: \_\_\_\_\_

Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone #1: \_\_\_\_\_ When is the best local time to call? \_\_\_\_\_

Telephone #2: \_\_\_\_\_ Fax #: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Number of Dependents: \_\_\_\_\_

U.S. Citizen: Yes  No  (If no, what country?): \_\_\_\_\_

(For US residents or US citizens) Social Security # or Tax ID: \_\_\_\_\_

(For non-US residents or non-US citizens) Passport number or Country ID: \_\_\_\_\_

**To ensure better communication, please let us know if your contact information including home address, phone number or email changes.**

Employer's Name: \_\_\_\_\_ # of Years there: \_\_\_\_\_

Nature of Business: \_\_\_\_\_ Position: \_\_\_\_\_ Telephone: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

If less than 2 years employment at current occupation, please detail previous employment history: \_\_\_\_\_

Employer's Name: \_\_\_\_\_ # of Years there: \_\_\_\_\_

Nature of Business: \_\_\_\_\_ Position: \_\_\_\_\_ Telephone: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

1. Do you have experience trading:

	Yes	# of Years?	No		Yes	# of Years?	No
Securities	<input type="checkbox"/>	_____	<input type="checkbox"/>	Options on Futures	<input type="checkbox"/>	_____	<input type="checkbox"/>
Stock Options	<input type="checkbox"/>	_____	<input type="checkbox"/>	Currencies	<input type="checkbox"/>	_____	<input type="checkbox"/>
Commodity Futures	<input type="checkbox"/>	_____	<input type="checkbox"/>	Currency Futures	<input type="checkbox"/>	_____	<input type="checkbox"/>

2. How did you hear about us? (Please be specific): \_\_\_\_\_

If you were referred to us, please provide the name of Referring Broker: \_\_\_\_\_

3. What is your total Estimated Annual Income? \$ \_\_\_\_\_

4. Net worth (Assets Minus Liabilities) \$ \_\_\_\_\_

5. Liquid Assets (Assets that can be quickly converted to Cash) \$ \_\_\_\_\_

6. Estimated Initial Deposit \$ \_\_\_\_\_

7. Have you ever declared bankruptcy? Yes  No 

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

8. **Bank Information:** Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Person to contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

Account in the name of: \_\_\_\_\_

ABA or SWIFT # (if applicable): \_\_\_\_\_ Your Account Number: \_\_\_\_\_

9. Will any other person(s) (other than the other tenant(s)) guarantee, or have financial interest in this account? Yes

 No 

If Yes, please Name: \_\_\_\_\_

10. Will any person other than Customer control, manage, or direct the trading in this account? Yes  No   
If Yes, please fill out Power of Attorney Risk Disclosure (Supplemental Form).

Page 3    080603    Initials X: \_\_\_\_\_    Initials X: \_\_\_\_\_    Date X: \_\_\_\_\_



# JOINT ACCOUNT APPLICATION

11. Is this an omnibus account? Yes  No

12a. Do you have or have you ever had a live account(s) with MG Co.? Yes  No

If Yes, provide live account User name: \_\_\_\_\_

12b. Do you have or have you ever had a demo account(s) with MG Co.? Yes  No

If Yes, provide demo account User name: \_\_\_\_\_

If lost, or misplaced, please confirm your MG demo account by marking an "X" in this box: [ ]

13. Are you or any person having interest in this account, a member of any commodity exchange or affiliated with any other securities or commodity brokerage firm? Yes  No

If Yes, please list: \_\_\_\_\_

14. Please specify any special arrangements, agreements or promises made between you, or any person having interest in this account, and the broker(s) or designated trading agent who is opening, or will be trading this account. (Use additional sheet if needed)

\_\_\_\_\_

15. Have you ever made an oral or written complaint regarding a past commodity futures, currency or securities account or do you have pending litigation, disputed accounts, or other unresolved matters with any currency Interbank, futures or securities broker(s)? Yes  No

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

16. Customer currently has interest in additional account(s) held by MG Co. or its successors, assigns or affiliates other financial institution recognized by MG Co.? Yes  No

If Yes, list the account number(s) and institution(s): \_\_\_\_\_

17. The Monthly Statements and Daily Trade Confirmations will be sent to one email address. The address can belong to either tenant. Please select one of the following options:

[ ] Customer agrees to receive electronic transmissions of Internet-hyperlinks to password-protected monthly statements and daily trade confirmations FREE OF CHARGE, to the following email address: \_\_\_\_\_

[ ] Customer agrees to have \$5 debited from his/her Trading Account for every Monthly Statement and \$3 debited from his/her Trading Account for every Daily Trade Confirmation delivered by post mail.

**18. Each tenant should submit one form of photo identification (ID) with his/her signature to complete this application.**

19. If the account is joining an IMA, it is the Tenants' responsibility to perform necessary due diligence to find qualifications of the Designated Trading Agent and to make sure that all arrangements are discussed and clearly understood prior to any trading activity.

Page 4 080603

Initials X: \_\_\_\_\_

Initials X: \_\_\_\_\_

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



# JOINT ACCOUNT APPLICATION

## II. JOINT ACCOUNT FORM:

Each tenant has authority to trade the account. Withdrawal requests will only be processed if the request form is signed by all tenants holding the account.

MG Co. has the authority to require joint action by the parties of the account in matters of the account. MG Co. has possession over the security of the account individually or jointly. If a death occurs to one or more of the tenants, MG Co. shall be notified in writing by the appropriate authority. All expenses charged due to the date of notification shall be charged to the account. Unless the signature below has a % interest designated, then the shares are presumed to be equal. (Attach a copy of this page for additional signatures.)

Tenant Signature \_\_\_\_\_ %

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Tenant Signature \_\_\_\_\_ %

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Page 5 080603 Initials X: \_\_\_\_\_ Initials X: \_\_\_\_\_ Date X: \_\_\_\_\_



# JOINT ACCOUNT APPLICATION

### III. ACCOUNT OWNER PASSWORD AND CONTACT INFORMATION

If you will be trading this account yourself, you should provide the passwords for this account here. If you have designated a Trading Agent (authorized via the Limited Power of Attorney Form) to trade the account, you should use this form to provide passwords that will enable you to access your account's Status Report on the MG Corp. website. On the next page, the Trading Agent will select passwords to allow trading.

**To be filled out by the Tenants of this account:**

\*Online password (6-12 symbols) \_\_\_\_\_

\*Phone password (different from online password) \_\_\_\_\_

**TENANT #1:**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address (IN ALL CAPS): \_\_\_\_\_ Male  Female

Street Address: \_\_\_\_\_ Apartment/Suite: \_\_\_\_\_

City: \_\_\_\_\_ State/Province/Land: \_\_\_\_\_

Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone #1: \_\_\_\_\_ When is the best local time to call? \_\_\_\_\_

Telephone #2: \_\_\_\_\_ Fax #: \_\_\_\_\_

Tenant's Name: \_\_\_\_\_

Tenant's Signature: \_\_\_\_\_

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

**TENANT #2:**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address (IN ALL CAPS): \_\_\_\_\_ Male  Female

Street Address: \_\_\_\_\_ Apartment/Suite: \_\_\_\_\_

City: \_\_\_\_\_ State/Province/Land: \_\_\_\_\_

Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone #1: \_\_\_\_\_ When is the best local time to call? \_\_\_\_\_

Telephone #2: \_\_\_\_\_ Fax #: \_\_\_\_\_

Tenant's Signature: \_\_\_\_\_

Tenant's Name: \_\_\_\_\_

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



# JOINT ACCOUNT APPLICATION

**PASSWORD AND CONTACT INFORMATION (TO ALLOW TRADING) - To be completed by the Trading Agent:**

\*Online password (4-8 symbols) \_\_\_\_\_

\*Phone password (different from online password) \_\_\_\_\_

Trading Agent's Full Name: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_ Male  Female

Email Address (IN ALL CAPS): \_\_\_\_\_

Street Address: \_\_\_\_\_ Apartment/Suite: \_\_\_\_\_

City: \_\_\_\_\_ State/Province/Land: \_\_\_\_\_

Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone #1: \_\_\_\_\_ When is the best local time to call? \_\_\_\_\_

Telephone #2: \_\_\_\_\_ Fax #: \_\_\_\_\_

Trading Agent's Signature: \_\_\_\_\_

Trading Agent's Name: \_\_\_\_\_

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

Page 7 080603 Initials X: \_\_\_\_\_ Initials X: \_\_\_\_\_ Date X: \_\_\_\_\_



# JOINT ACCOUNT APPLICATION

**THIS IS A BINDING AGREEMENT; DO NOT SIGN UNTIL YOU HAVE READ THE FOREGOING CAREFULLY**

The undersigned Tenants acknowledge, understand, and agree to abide by the contents of this application, the Customer Agreement, and all other agreements made in conjunction with this document.

The undersigned acknowledges having received, read, understood, and agreed to the terms and conditions of the Customer Agreement.

By signing the Agreement, the Customer authorizes MG Co. and its associates to use the Currencies, or the ownership thereof, as collateral for a loan, the proceeds of which are used to pay for the currencies until rollover of the currency or commodity to a new settlement date and/or payment in full by Customer. This authorization shall apply to all accounts carried by MG Co. and associates for Customer. This shall remain in effect until the account is closed and all financial responsibilities are completed.

I, the undersigned Customer, received a copy of the Risk Disclosure Statement as part of the Customer Agreement and I read and understand it.

By signing this Application and the Customer Agreement, Tenants acknowledge that any money lost will not negatively affect individual lifestyles of the Tenants.

The undersigned hereby attest(s) and certifies to be a financial institution and/or sophisticated investor fully aware of the risks involved in foreign exchange trading. The undersigned also attest(s) the information in this application is complete and accurate. The undersigned hereby authorize(s) MG Co. to verify any or all of the foregoing information.

Tenant 1 Signature X: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date (DD/MM/YYYY): \_\_\_\_\_

Tenant 2 Signature X: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date (DD/MM/YYYY): \_\_\_\_\_

*Add copies of applicable pages for additional Tenants.*

**CHECKLIST**

Have you included all of the following with your Application?

**For US Applicants:**

- Joint Account Application
- One form of Photo Identification for each Tenant (eg. Passport or Drivers License)
- Signed & Executed Customer Agreement

**For Non-US Applicants:**

- Joint Account Application
- One form of Photo Identification for each Tenant (eg. Passport or Country ID)
- Signed & Executed Customer Agreement

To open an account traded by a party other than the tenants of this account, each tenant must complete, and submit all portions listed in Section 1 as well as:

- Limited Power of Attorney Form

In order to participate in an Integrated Management Account (IMA), the tenant(s) must understand, complete, and submit the following sections:

- All of the above
- Integrated Management Account Acknowledgement

Note: all applicants must be 21 years or older to be approved for trading.

Page 8    080603    Initials X: \_\_\_\_\_    Initials X: \_\_\_\_\_    Date X: \_\_\_\_\_