

APPLICATION FORM FOR THE REGISTRATION OF AN AUTHORISED REPRESENTATIVE– ANNEX TO BORSA ITALIANA MEMBERSHIP APPLICATION FORM

This application will only be taken into consideration when this form and all necessary documents have been returned to the Membership Department, who may request additional information:

Please note

- The term “Member” in this application shall refer to a Borsa Italiana member.
- An Authorised Representative is the person whose duties are detailed in EURONEXT NOTICE 2-01 as amended in June 2022.

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Please send this form duly signed to
Blt-membership@euronext.com.

Name of Member firm	
LEI Code	

Requests the registration, as **Authorised Representative**, of the following person:

DETAILS OF PROSPECTIVE AUTHORISED REPRESENTATIVE (IN CASE OF MULTIPLE AUTHORISED REPRESENTATIVE PLEASE COMPLETE THE DETAILS FOR EACH OF THEM)

Surname	
First name(s)	
Telephone (office)	
Mobile phone	
Email (office)	

Signature of the Prospective Authorised Representative	
DATE (day, month and year)	

The undersigned declare that this form has been completed truthfully and in full.

All changes to the above information must be reported immediately in writing to Borsa Italiana's Membership department to Blit-membership@euronext.com.

Full name		
Position		
Signature		
Place		
Date		