



Financial Square  
 32 Old Slip 10th Floor  
 New York, NY 10005 USA  
 Tel. 212.897.7660  
 Fax 212.897.7669  
 Email: info@fxcm.com

## Change of Account Type Form

In connection with my foreign exchange trading account carried by Forex Capital Markets, LLC, ("FXCM"), the undersigned hereby ratifies and confirms that he is requesting for a change in account platform type from his current account type to one of the account types below:

**Existing Account Type:** USD 100K USD Mini JPY 100k JPY Mini GBP Mini EUR Mini

**Existing Account #** \_\_\_\_\_ **Amount to Transfer** \_\_\_\_\_

**Desired Account Type:** USD 100K USD Mini JPY 100k JPY Mini GBP Mini EUR Mini

Referring Agent, if any \* \_\_\_\_\_

\* Must read Referral Disclosure in Trading Agreement

|   |   |
|---|---|
| <p><b>Please select a PASSWORD (4 to 10 characters)</b><br/>         (A Temporary Password will be assigned to you)</p> <p><b>Security Question:</b><br/> <input type="checkbox"/> What is your first pet's name?    <input type="checkbox"/> What was the first street you lived on?<br/> <input type="checkbox"/> What is your nickname?            <input type="checkbox"/> What is your Mother's maiden name?</p> <p><b>Answer:</b></p> | <p><b>E-MAIL Address (Required)</b><br/>         An email notification will be sent to the email address on file for your existing account upon setup of your new account<br/>         This will be the primary method used to contact you.</p> |
|---|---|

This 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. Any party of a joint account may singly have full authority on the account, including but not limited to, trading rights and withdrawal rights. For the purpose of this document the term "Trader" always refers to the entity for which this application has been made, regardless of legal description. **Please type or print clearly.**

|  |                    |  |                    |
|--|--------------------|--|--------------------|
| <b>1 Primary Account Holder</b>  |                    | <b>Joint Account Holder (if any)</b>   |                    |
| Last Name: _____   | First Name: _____  | Last Name: _____   | Middle Name: _____ |
| Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female            |                    | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female            |                    |
| Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married |                    | Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married |                    |
| <b>2 Date of birth (MM / DD / YY)</b>  | <b>Citizenship</b> | <b>Date of birth (MM / DD / YY)</b>  | <b>Citizenship</b> |
| <b>3 Home address</b>  |                    |  |                    |
| No. and Name of Street   |                    |  |                    |
| City, State, Zip Code, and Country   |                    |  |                    |
| Home telephone no.   | Home fax no.       | Mobile Phone no.   |                    |

**THE ABOVE INFORMATION MUST BE COMPLETED IN FULL TO PROCESS THIS CHANGE**

I/We hereby represent that the information provided by me is true and correct. I/We further represent that I/we will notify FXCM of any material changes in writing. FXCM reserves the right, but has no duty, to verify the accuracy of information provided, and to contact various sources as it deems necessary. I/We acknowledge that the FXCM Trading Agreement is a legally binding contractual agreement. I/We have carefully read a recent version of this agreement, and I/we agree to be bound by every term and condition.

|   |   |
|---|---|
| Primary Account Signature:<br><br>Print Client Name:<br><br>Date: | Joint Account Signature:<br><br>Print Client Name:<br><br>Date: |
|---|---|