

APPLICATION FORM FOR AUSTRALIAN INDIVIDUAL APPLICANT

A reference in this Application Form to Admiral Markets is (unless otherwise defined) a reference to Admiral Markets Pty Ltd (ACN 151 613 839), AFSL 410 681 its associates and its successor and assignee from time to time.

SECTION 1: PERSONAL INFORMATION

Surname:	<input type="text"/>
First name:	<input type="text"/>
Middle (given) name(s):	<input type="text"/>
Formername(s):	<input type="text"/>
Date of Birth:	<input type="text"/>

SECTION 2: IDENTIFICATION INFORMATION

For electronic verification and fast account approval, please provide the details below

1) Australian Medicare:

Medicare number	<input type="text"/>
Reference number (alongside name):	<input type="text"/>

OR

2) Australian Drivers License:

State issued within Australia:	<input type="text"/>
Date of expiry:	<input type="text"/>
Card Number:	<input type="text"/>

OR

3) Australian Passport :

Passport number:	<input type="text"/>
Country of birth:	<input type="text"/>
Place of Birth:	<input type="text"/>

SECTION 3: RESIDENTIAL ADDRESS AND CONTACT INFORMATION

Street:	House:	App#:
City:	State/ Region:	Country:
		Post code:

Please include previous residential address if currency tenancy is less than 3 years.

Street:		House:	App#:
City:	State/ Region:	Country:	Post code:
Phone:		Mobile:	
E-mail:			

■ SECTION 6: AUTHORITY

I/We, hereby declare that by signing this Agreement;

1. I/We confirm that I/we have received, read and understood the following documents:
 - [Admiral Markets Product Disclosure Statement](#);
 - [Admiral Markets Financial Services Guide](#); and
 - [Admiral Markets Account Terms](#);
2. I/We apply for an Account on the terms of and agree to be bound by the Admiral Markets Account Terms;
3. I/We agree and consent that Admiral Markets may collect, retain, store, use and disclose information about me/us and, if applicable, my/our directors, officers, agents, beneficiaries and authorised representatives for the purposes of operating my/our Account, implementing transactions permitted to be made for it, complying with legal obligations or as I/we authorise from time to time. I/We agree that this information may be disclosed to associates of Admiral Markets or to service providers for my/our Account, and may be used by any of them only for the purposes of our Account;
4. For Anti Money Laundering and Counter-Terrorism Financing, I/we confirm that I/we have
 - a. Not been subject to bankruptcy proceedings in the past 7 years;
 - b. Not been refused credit or financing;
 - c. Not had, nor currently have a criminal record;
 - d. Not been banned from holding office as a company director
5. I/We acknowledge and agree that an Account for me/us will be established on the Account Terms applying to this Application Form; and
6. the information that I/we have supplied in this Application Form is true and correct and not misleading.

Date of Execution
(DD/MM/YYYY):

Applicant

Given Name (First Name):

Surname:

Signature: