

Application for Offshore Intermediary Registration

1) ORGANISATION

Firm Name	<input type="text"/>		
Correspondence Address	<input type="text"/>		
	<input type="text"/>		Postcode <input type="text"/>
Telephone No.	<input type="text"/>	Fax No.	<input type="text"/>
Country of Incorporation	<input type="text"/>	Company No. (if incorporated)	<input type="text"/>
Name of Principal	<input type="text"/>		
Primary Contact	<input type="text"/>	Title	<input type="text"/>
Email Address	<input type="text"/>		

2) REGISTERED ADVISERS

Complete this section for any individuals authorized to submit business including Primary Contact if relevant.

Individual's Name	<input type="text"/>	Title	<input type="text"/>
Email Address	<input type="text"/>		
Telephone No.	<input type="text"/>		
Individual's Name	<input type="text"/>	Title	<input type="text"/>
Email Address	<input type="text"/>		
Telephone No.	<input type="text"/>		
Individual's Name	<input type="text"/>	Title	<input type="text"/>
Email Address	<input type="text"/>		
Telephone No.	<input type="text"/>		
Individual's Name	<input type="text"/>	Title	<input type="text"/>
Email Address	<input type="text"/>		
Telephone No.	<input type="text"/>		

3) DECLARATION

I/We hereby apply to be registered with you as an Intermediary, subject to the terms and conditions set out in the Intermediary Service Agreement regulating relations between Marlborough and Intermediaries. I/We confirm that all the information that I/We have provided herein is accurate and true. (* Delete as appropriate).

Signed on behalf of:

Name of Firm	<input type="text"/>
Signature	<input type="text"/>
Print Name	<input type="text"/>
Position	<input type="text"/>
Date	<input type="text"/>

ONCE FULLY COMPLETED, THIS FORM AND THE COMPLETED INTERMEDIARY SERVICES AGREEMENT SHOULD BE SENT TO:

Marlborough Investment Management Limited, Head Office, PO Box 1852, Lichfield, WS13 8XU
or e-mailed to Discretionary@marlboroughinvests.com

