



Private Clients - Registration Form

This form must be completed and signed, and the required proofs of identity returned before SGM-FX can open your account, treat you as a client, and satisfy your currency needs. Please ensure that you answer all of the questions below.

Part 1 - Details

Title: (Mr/Mrs/Miss/Ms)

Surname: _____

1 st Name(s): _____

Address: _____

Post Code: _____

Other addresses: _____
(within the last three years)

Nationality: _____

Contact Numbers: Work: _____

Home: _____

Fax: _____

Mobile: _____

Email Address: _____

Part 2 - Proof of Identity

Please include a copy of one of the following and tick the relevant boxes

Passport; or
 Driving Licence } showing photograph

and

Electricity Bill; or
 Water Bill; or
 Gas Bill; or
 Council Tax Bill } not older than 3 months

Part 3 - Terms and Conditions

Please read, sign and return the Terms and Conditions with this form.

I have read and understood the Terms and Conditions set out in the SGM-FX Agreement.

Signature: _____

Full Name: _____

Date: _____

Once completed, please fax back to SGM-FX on +44(0)207-778-0234

For SGM-FX use only (Introducer LynxBanc)

Client Account No _____ Client Executive _____

All Documents included _____ Compliance completed _____ Date _____