IFUS MEMBER APPLICATION

Country Firm Name: Business Address	Last Name	First N	ame	M.I
City State Zip Code Country Firm Name: Business Address Business Address City State Zip Code City State Zip Code Code Country E-Mail address Telephone Numbers:	Date of Birth	Citizenship	Social Secu	:ity #
Country Firm Name: Business Address Business Address City State City State Country E-Mail address Country E-Mail address Telephone Numbers:	Home Address			
Firm Name:	City	State		Zip Code
Business Address City State Country E-Mail address Telephone Numbers: Home Business Mobile (Cell) Contact Information: (a) designate the address where service of Exchange documents may be made upon you:	Country			
City State Zip Code Country E-Mail address Telephone Numbers: Home Business Mobile (Cell) Contact Information: (a) designate the address where service of Exchange documents may be made upon you:	Firm Name:			
Country E-Mail address Telephone Numbers: Home Home Business Mobile (Cell) Contact Information: (a) designate the address where service of Exchange documents may be made upon you:	Business Address			
Telephone Numbers: Home Business Mobile (Cell) Contact Information: (a) designate the address where service of Exchange documents may be made upon you:	City	State		Zip Code
Home Business Mobile (Cell) Contact Information: (a) designate the address where service of Exchange documents may be made upon you:	Country	E	E-Mail address	
Mobile (Cell) Contact Information: (a) designate the address where service of Exchange documents may be made upon you:	Telephone Numbers:			
Contact Information: (a) designate the address where service of Exchange documents may be made upon you:	Home	Busine	ess	
(a) designate the address where service of Exchange documents may be made upon you:	Mobile (Cell)			
	Contact Information:			
	(a) designate the address	where service of Exchang	e documents may be	e made upon you:
If you are registered with the CFTC/NFA, indicate registration number and category:				
	If you are registered with	the CFTC/NFA, indicate a	registration number	and category:

- 7. Within the past 10 years, has the applicant been subject to a suspension, expulsion, bar, fine in excess of \$25,000, denial of membership or registration, temporary or permanent injunction, denial of trading privileges or other significant sanction or discipline through an adverse determination, voluntary settlement or otherwise by:
 - (i) the Securities and Exchange Commission, the Commodity Futures Trading Commission, or the securities commission or equivalent authority of any state, territory, the District of Columbia or foreign country?

YES____NO____

YES____NO___

(ii) Any commodity or securities exchange, related clearing organization, the National Futures Association or the Financial Industry Regulatory Authority, or comparable foreign regulatory authority.

- (iii) Any court or regulatory agency (not mentioned above), based upon activities relating to commodities, securities, banking, or finance.
 - YES___ NO___

YES NO

- 8. Within the past 10 years, has the applicant been convicted, or been found guilty of, or pleaded guilty or *nolo contendere* to a felony?
- 9. Within the past 10 years, has the applicant been convicted, or been found guilty of, or pleaded guilty or *nolo contendere* to a misdemeanor charging misrepresentation, fraud, deceit, theft, embezzlement, gambling, conversion, money laundering, abuse of fiduciary relationship or other action involving the misuse of the funds or property of others?
 - YES___ NO___

YES NO

10. Is there a written complaint (or its equivalent) currently filed or pending against the applicant in any judicial, administrative or self-regulatory proceeding, as the case may be, against you by the CFTC, the SEC, the securities commission or equivalent authority of any state, territory, the District of Columbia or foreign country, or any commodity or securities exchange, or any registered futures or securities association, or any self-regulatory organization?

I understand that the Exchange may conduct, or cause to be conducted, an investigation of my financial status, character, general reputation and business history, and I hereby give the Exchange permission to request any such information.

I hereby agree that, if I am accepted as a an IFUS Member, I will observe and be bound by and will comply with all the provisions of the certificate of incorporation, by-laws, rules, resolutions, orders, decisions, awards, requirements and procedures of the Exchange as now in effect, hereafter adopted or hereafter amended.

I certify that the information contained in this application and any attachments hereto is true, complete and accurate. I agree to notify the Exchange of any material changes which may hereafter occur with respect to any information requested in this application.

Signature of Applicant

Date

CONSUMER REPORT DISCLOSURE NOTICE AND AUTHORIZATION

This Consumer Report Disclosure Notice and Authorization is to inform you that ICE Futures U.S., Inc. may obtain or cause to be obtained a consumer report as part of a background investigation. By signing this form below, you authorize ICE Futures U.S., Inc. to obtain or cause to be obtained a consumer report and hereby release ICE Futures U.S., Inc., its agents, directors, employees and members from any and all liability for damages of whatever kind, which may at any time result to you, your heirs, or family arising from or related to, the authorization granted herein.

Signature of Applicant

Date

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The applicant is required to appear before the Membership Committee if requested to do so. Failure of the applicant to appear will be understood to be a withdrawal by the applicant of the application.