

APPLICATION FOR CHANGE OF MEMBERSHIP STATUS

The undersigned hereby applies for change in membership status in the ICE Futures U.S., Inc. Exchange.

1.

Name	Social Security No.
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2.

Home Address	Date of Birth
City, State, Zip	Home Telephone No.
Firm Name	Business Telephone No.
Firm Address	Emergency Contact (Name/Telephone No.)
City, State, Zip	E-mail Address
Firm Address	Emergency Contact (Name/Telephone No.)

3. Check the current membership(s) held and the membership(s) to be acquired and/or terminated.

Membership Type	Held	Acquire	Terminate
Trading Membership			
Option Trading Permit			
Finex® Trading Permit			
Finex® European Trading Permit			

4. How will you obtain the new membership? (check one):
 - a. ☐ Transfer from another member. If yes, give transferor's name _____
 - b. ☐ Bid for a membership in the Exchanges' membership market upon election to membership.

I understand that an application for change of status is an extension of any current membership responsibilities.

I hereby agree that I will continue to observe and be bound by and will comply with all provisions of the certificate of incorporation, by-laws, rules, resolutions, orders, decisions, awards, requirements, and procedures of the ICE Futures U.S., Inc. Exchange and retain membership privileges as now in effect, hereafter adopted or hereafter amended.

I certify that there has not been any material change in my financial condition and that the information contained in this application is true, complete, and accurate. I agree to notify the ICE Futures U.S., Inc. Exchange of any changes which may hereafter occur in any information requested in an application for membership.

Signature of Applicant

Date

<u>Member Services Use Only</u>	
_____ Approved by:	_____ Date