

NEXUS GLOBAL

FEIFA Membership Application Form

Kindly complete the below application using as much detail as possible. If there is insufficient space in any of the below sections please continue in the **Additional Information** section at the end of this form, making it clear which section the extra details are pertinent to.

The signed form should be returned to pstanfield@feifa.eu. E-signatures are accepted with the receipt attached. Alternatively, you can simply print this off, complete in writing, scan and email it to that address.

MEMBERSHIP FEES

Please note fees will be billed to Nexus Global for the first year of your FEIFA Membership. Subsequent fees will be billed directly to your firm.

1. Company/Trading Details:

Company name	
Trading name	
Date when trading commenced	
Jurisdictions trading in	
Other trading and/or company names used in the last 5 years (<i>if any</i>)	
Registered office address	
Correspondence address (<i>if different</i>)	
Address of other office/s (<i>if applicable</i>)	
Management structure (<i>including names</i>)	
Main phone number	
Main email address	
Website URL	
Main point of contact	
Direct email and mobile phone number for the above (<i>if applicable</i>)	
Number of advisers	
Countries in which business is written	

2. Principals

Full name	
Job title	
Time with company	
Mobile	
Email	
Shareholding (%)	
Qualifications	
Short summary of relevant experience and past roles in financial services	

Full name	
Job title	
Time with company	
Mobile	
Email	
Shareholding (%)	
Qualifications	
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Full name	
Job title	
Time with company	
Mobile	
Email	
Shareholding (%)	
Qualifications	
Short summary of relevant experience and past roles in financial services	

Please provide details on a separate sheet if there are more than three Principals (or in the Additional Information section below).

Additional Information (if relevant)

If further space is required, please use a separate sheet and ensure that it is signed by all signatories below.

Declaration

By signing the below, each signatory confirms that the information given in this application is complete and correct to the best of their knowledge and that they know of no other facts of which FEIFA should be made aware. **It also confirms that each signatory has read and agreed that they and their business will abide by the FEIFA Code of Conduct** and have read our [Privacy Notice](#) which details how we will use and store your data, if you become a member.

The form should be signed by at least two Principals, except where the operation is a sole trader.

Privacy notice	https://feifa.eu/wp-content/uploads/2018/06/FEIFA-Privacy-Notice-May_2018-1.pdf
FEIFA Code of Conduct	https://feifa.eu/feifa-code-of-conduct/

Full name	
Signature	
Date	

Full name	
Signature	
Date	

Please note that membership applications usually require proof of regulatory status, a copy of the up-to-date Professional Indemnity Insurance Policy Schedule, and various other documents. As you are a Nexus member, we already have this information and have thus streamlined your membership application process.

Please note that the above information is treated in the strictest confidence.