

#### First and last name of the account holder (in block Social Insurance No CHOOSING THE TYPES OF OPTIONS YOU PLAN TO TRAD type includes those listed before it Indicate the type of options you plan to trade (check one bo Subject to approval of R O P Purchase of options Covered call writing Options strategies Uncovered options writing Do you have experience with Options? Yes No If so, indicate the number of years How would you rate your knowledge in options? None or little Average Good Excellent Financial information of the account holder. Financial information of the account co-holder Total net worth (a + b) Following a regulation of the Montreal Exchange (MX), we interest, we mean participation, control or influence. ntify all beneficial owners with more than 50% interest in the account. By ☐ There is no beneficial owner with more than 50 If the beneficial owner of more than 50% is an individual, please submit the social insurance number (SIN) of the individual: If the beneficial owner of more than 50% is a corporation, please submit its registration number: If the beneficial owner of more than 50% is any other type of entity (Trust, Estate etc.), please submit its complete legal name as shown on the relevant documents creating the said entity: YOUR AGREEMENT By signing below, you acknowledge and agree that: You have received, read and understood the terms and conditions of the Option Trading Agreement and the provisions of this agreement and agree to be bound by it. This Agreement, the provisions contained in the client file you have completed, the general account agreement and specific agreements related to accounts you have selected represent our agreement with you;

You read, understood and agree to the "Derivatives Risk Disclosure Statement" relating to your options trading accounts contained in this agreement; In the event of conflict between the general terms and conditions in these documents and in this Options Trading Agreement, or with the brokerage account opening form, the Options Trading Agreement will prevail.

Date (MM DD YYYY)

ient rédigés en anglais

ench version of this agreement available <u>here</u>. I also confirm it is my wish that this

ision française de ce contrat disponible <u>ici</u>. Je confirme également ma

LANGUAGE CONFIRMATIONS
(Quebec only – as of June 1st, 2023) - I confirm having received a F agreement and all related documents be drawn up in English.
(Quebec seulement – à partir du 1er juin 2023) - Je confirme avoir

volonté que ce contrat et tous les documents s'y rattachant

Date (MM DD YYYY)

Signature of the account hold

Quick Reference
30293 Form
Options Trading Request



#### Identification

Identify the holder and co-holder and mandatorily enter the account number OR the social insurance number.



# Type of negotiated options

- Check the appropriate box or boxes:
  - Choice 1 & 2: for cash, margin or registered accounts.
  - Choice 3 & 4: for margin accounts only.



# Your experience

 All questions in this section must be completed by holder and co-holder.



### **Benficial Owner +50%**

 Identify if a person has a participation of more than 50% in this account.



# **Signature & Sending Form**

- > The **signature(s)** and the **date** are mandatory.
- An electronic signature via Adobe software is accepted.
- It is important to send the completed form vis secure <u>Message Centre</u> of the online brokerage platform.

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