



**NEW WAYS**  
T R A D I N G

## **Registration Application**

### **INSTRUCTIONS**

#### **Step 1: Complete Application**

Review customer agreement and cover page for required account type sections (Individual, Joint, etc.)

#### **Step 2: Submit Identification**

Fax Application & Documentation to +1 718 437 4299 or scan and email to [sales@newwaystrading.com](mailto:sales@newwaystrading.com)

##### Individual Account

Please submit two forms of ID:

1 Government issued photo ID such as driver's license or passport

1 Proof of residence, such as current utility bill or bank statement

##### Joint Account

2 forms of ID per account holder and a copy of a current Joint Bank account statement \* Required for withdrawal\*

##### Business / Corporation / LLC/ Partnership Account

2 forms of ID per authorized user, State registration documents, Articles of Corporation (if applicable)

#### **Step 3: Fund your account**

Important: In order to activate your account for trading it will also be necessary for you to fund your account. You can do so by four (4) methods:-

1) Cash 2) Credit Card 3) Bank Wire 4) Money Express i- Western Union, ii- Money Gram

Note: Regardless of the funding method you choose, the originator of the funds must always match the name listed as the customer on the Account.

#### **Step 4: Application status**

Live account application require up to 1-2 business days for processing. Please continue to monitor your primary email / Mobile SMS for notices regarding your application.

Once your account is created, funded, and required documentation (if applicable) is received, you will receive an email and Mobile message containing your User Name and Password.

## Account Application

The information below must be completed in Full

### SECTION I:

#### Account Type:

- Individual Account     Joint Account     Business Account  
 Islamic Gold     Student     Trust/Agent

#### Platform:

- NWT Dealing Room     Vertex 10

#### Initial Deposit Amount:

- Micro     Standard  
 Mini

#### Primary Account Holder Email Address:

Primary Email Address:   
(our primary Method of Contact)

#### Introducing Broker:

Broker Name:   
 Broker Email:   
 Broker Ref:

#### Primary Account Holder (or Business Owner) - Personal Information:

Last Name:     First Name/Middle:   
 Gender:  Male     Female    Marital Status: (Married)  Yes     No    Title (if applicable)   
 Citizenship: U.S.  Yes     No        Date of Birth: (MM/DD/YYYY)   
(Enter Citizenship here)  
 Passport #, Driver's License #, National ID Card #, Other.

#### Home Address:

Street Address:     Mailing Address:   
(P. O. Box, Other)  
 City     State/Province:     City     State/Province:   
 Postal / Zip Code:     Country:     Postal / Zip Code:     Country:   
 Home Telephone #     Home Fax #     Mobile Phone#   
 Secondary Email Address:

#### Investment Experience:

Stock/ Bonds     Yes     No    \_\_\_\_\_  
 Foreign Currency     Yes     No    \_\_\_\_\_  
 Funds     Yes     No    \_\_\_\_\_  
 Options     Yes     No    \_\_\_\_\_  
 Mutual Funds     Yes     No    \_\_\_\_\_

#### What is the Highest level of education completed

- No High School     High School Degree  
 College Degree     Graduate Degree

We offer leverage products that are high risk, Do you understand that you can lose more than your initial investment if your transaction does not perform as you expect?  
 Yes     No

Do you understand that small movements in an under security can result in your transaction incurring much larger profits or losses, and that the more leverage that is available, the greater the affect will be?  
 Yes     No

Do you recognize that it is your responsibility to monitor your account and risk management tools where appropriate such as stop losses to reduce any potential loss you may incur?  
 Yes     No

**SECTION II:**

**Current Employment Information:** (of Primary Account Holder) **Must Check at least one box.**

Employment Details:  Employed  Self Employed  Student  Homemaker  Unemployed  Retired

Employer Name:  Business Type:

Business Mailing Address:  Business Telephone:

City:  State/ Province:  Business Fax:

Postal / Zip Code:  Country:  Business Email Address:

My Employer is IBC Licensed.  Yes  No

**Financial Information: (USD)** (for Joint Account, please use combined financial information)

- 1- What is your estimated Annual Income?  Less than \$1000  \$1000 to \$10000  \$10000 to \$ 30000  Over \$30000
- 2- What is your Net worth? (excluding equity in home)  Less than \$ 30000  \$30000 to \$50000  over \$ 50000
- 3- What is your Liquid Net Worth?  Less than \$ 15000  \$15000 to \$30000  over \$ 30000

**SECTION III:**

**Joint Account Holder - Personal Information:** (For Joint Account only)

Last Name:  First Name/Middle:

Street Address:

City:  State/Province:  Postal/Zip Code:  Country:

Gender:  Male  Female Date of Birth: (MM/DD/YYYY)  Marital Status: (Married)  Yes  No

Citizenship: U.S.  Yes  No   
(Enter Citizenship here)

Passport #, Driver's License #, National ID card#, Other:  Email:

Relationship to Primary Account Holder:

**Please Note: Funds may only be withdrawn to a Joint Bank Account in both account holder's names.**

**SECTION IV:**

**Business Account Type:**

- Corporate Account  Partnership  Limited Liability Company

**Business/Trust Contact Information: (for Business Account only)**

Name of Business:  Type of Business:

Street Address:  Business Telephone:

Apartment/Suite:  Business Fax:

City:  State/Province:  Zip Code:  Business Email:

State/Country of Incorporation:  Tax ID#:

**Financial Information: (for Business Accounts Only)**

Annual Income of Corporation (USD)  Less than \$ 100,000  \$150,000 to \$ 200,000  Over \$ 200,000

Net Worth of Corporation \$

Name of Bank / Institution  Contact Name:

Address of Bank / Institution  Telephone #:

**Additional Authorized Individual's - Personal Information:**

1- Full Name:  Position/Title:

Passport#, Driver's License #, National ID card#, Other: (Non U.S. Resident)

2- Full Name:  Position/Title:

Passport #, Driver's License #, National ID card#, Other: (Non U.S. Resident)

1- Has entity ever been, registered with the (IFSC), or other similar regulatory body?  Yes  No

If yes, please provide any identification numbers:

2- Are any principals related to any person associated with or employed by NWT USA?  Yes  No

If Yes, Who?

3- What is the purpose of this trading account? (speculation, hedging, etc.)

4- What is the source of funds used in this trading Account?

5- Will any third party's funds be added to this account?  Yes  No

If Yes, Please explain

**Limited Power of Attorney:**

If any person other than the customer, control, manage or direct the trading in this account, a Limited Power of Attorney form must be submitted. (The "Limited Power of Attorney" form can be retrieved from sales@newwaystrading.com

**SECTION V:**

**Signature Section:**

**BY SIGNING BELOW, THE UNDERSIGNED REPRESENT AND COVENANTS TO HAVE READ AND UNDERSTAND THIS NWT USA CUSTOMER ACCOUNT APPLICATION (THE APPLICATION), WHICH INCLUDES:**

Risk Warning Notice  
Foreign Exchange Contract  
Contracts for difference  
Conflicts of interest Policy  
Trade and Order execution  
Account Application  
General Terms

**Further, the undersigned:**

- Attests and agrees that all information requested in this application is complete and accurate, including, but not limited to the customer application form:
- Represent that the information requested for in this application has been completed in the undersigned's own handwriting:
- Hereby authorizes NWT to verify any or all of the foregoing information provided in this application: and
- Acknowledges understanding the foregoing terms of this application including risk of loss, margin policy and incurring deficit balances and agree to be bound thereby.

Primary Customer Signature                      Dated

\_\_\_\_\_

Print Primary Name

\_\_\_\_\_

Joint Customer Signature                      Dated

\_\_\_\_\_

Print Joint Name

\_\_\_\_\_

**Beneficiary Designation :** (if applicable)

Name:

Relation:

Address:

**Notes:**

**ID INSERTION PAGE**

**NWT in the United States may at its sole and absolute discretion, ask for documents to confirm your identity or may use a third party for verification purposes.**

Customer's Name:  (if applicable) Account #

**Photo ID (Driver's License, Passport etc.)**

**Proof of Residency (utility bill, phone bill etc.)**