

Registration Form OTC IRD Gold Pack for Clearing Members' own Transactions

Eurex Clearing AG
Group Client Key Account Management Clearing

60485 Frankfurt am Main

Applicant

*Name of the Applying Clearing Member

*Address 1

*Street No

Address 2

*Zip Code

*City

*Country

Contact person

*First name / Last name

Set up effective from

DD MM YYYY

*Telephone

*Fax

Deletion effective from

DD MM YYYY after close of
business

*E-mail

Change effective from

DD MM YYYY after close of
business

*Eurex Clearing Member ID

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Name of OTC Central Coordinator¹

Phone:

Fax:

Email:

Name of deputy Central Coordinator (optional)

Phone:

Fax:

Email:

¹ The OTC Central Coordinator is the main contact for all OTC IRS related topics and responsible for in-house distribution of all information relevant for OTC IRS Clearing, and accordingly, will be regarded by Eurex Clearing as authorized to receive declarations on behalf of the Clearing Member. In case no "ISDA Definition Receiver" is mentioned under "Additional Contacts", the person nominated as OTC Central Coordinator will receive the 2006 ISDA Definitions.

Selection of Pricing Model²:

Standard Pricing Model

Optional (in addition to the Standard Pricing Model)

Rebate Scheme for Gold Pack
IRS; FRA; OIS

Rebate Scheme for Gold Pack Silver Pack
ZCIS

Registration of
affiliated Clearing
Members for Gold
Pack Rebate
Scheme

If, with respect to one or both of the Gold packs above, the checkbox “per group of affiliated Clearing Members” is checked, the following information on the group needs to be provided. By providing the names of the Clearing Members belonging to the group, the undersigning Clearing Member represents and warrants by way of an independent guarantee and irrespective of fault (*selbständiges, verschuldensunabhängiges Garantieverprechen*) to Eurex Clearing AG that (i) it has been appointed as a group leader by the affected Clearing Members in accordance with Number 10.4 (5) (e) of the Price List and (ii) it is duly authorized to act on behalf of the affected Clearing Members for the purpose of choosing the Gold pack(s).

#	*Name of affiliated Clearing Member belonging to the group	*Eurex Clearing Member ID				
1 (group leader)						
2						
3						
4						

Unless the context requires otherwise, terms used and not otherwise defined in this circular shall have the meaning ascribed to them in the Clearing Conditions of Eurex Clearing AG.

*Date

*Place

*Name, Title

*Name, Title

² Terms and conditions in accordance with number 10.2 and 10.4 of the Price List of Eurex Clearing AG in conjunction with terms and conditions set out in Eurex Clearing Circular 108/19 apply. By signing this form, the Clearing Member accepts said terms and conditions.