

SECURITIES ACCOUNT REGISTRATION FORM (For Individuals) (GSD 1a) 07547
To be completed in BLOCK LETTERS

Client Account Code: (To be filled by Depository Participant Only)

Title:

Surname: First Name

Other Name(s) Previous Name(s)

Mailing Address City/Town

Residential Address Country

Nationality: Contact Tel:

Date of Birth(dd/mm/yyyy) (Mobile)

Email: Fax:

National ID/Passport/ Drivers Liscence/NHIS/Voters ID No.:
(Underline the one being used)

Place of Issue: Date of Issue:
(dd / mm / yy)

Residential Status:
(Tick where appropriate) Resident Ghanaian Resident Foreigner Non Resident Ghanaian
 Non Resident Foreigner

Occupation:

Statement
Send statement by (tick where applicable) email post Hold

If Bank, give details Account No. Account Name:
Name of Bank Branch:

For 2nd Joint Account Holder (optional)

Title:

Surname: First Name

Other Name(s) Previous Name(s)

Tel: (Home) (Office) (Mobile)

National ID/Passport/ Drivers License/NHIS/Voters ID: No.
Place of Issue: Date of Issue:
(dd / mm / yy)

Declaration: I/We hereby
(i) request to open and maintain an account for securities in my/our names
(ii) affirm that all information in the form are correct
(iii) undertake to notify the Depository Participant of any change of particulars or information provided by me /us in this form

(name) (signature) (date)

(name second joint) (signature) (date)

Particulars of Next of Kin

Full Name:

Relationship with applicant

Address

Supporting documents: (Certified Copy of (National ID/Passport/Driver's License/NHIS/Voters ID))