Model C07

Authorised Representative Registration

1. **Identification**

|  |  |  |
| --- | --- | --- |
| Entity: |  |  |
| Representative Name: |  |  |
| Position: |  |  |
| Address: |  |  |
| City/Post Code: |  | Country: |
| Telephone |  | Fax: |
| E-mail: |  |  |

1. **Declaration of No Criminal Record**

The candidate declares that, giving his/her word of honour, he/she has never been subject to:

* Criminal conviction, countermanded, civil or administrative, that would prevent him/her from managing, administrating or directing any entity or executing commercial activity;
* Any investigation or procedure that could lead to a criminal conviction, countermanded, civil or administrative, that would prevent him/her from managing, administrating or directing any entity or executing commercial activity.

|  |  |
| --- | --- |
| **Date:**  \_\_\_\_\_\_/\_\_\_\_\_\_ / \_\_\_\_\_\_ |  |

**Signatures:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | |  | |  | |
| *Authorised Representative candidate signature* | |  | | *Signature of person with the powers to bind the company, with recognition of that ability* | |

***NOTE****: Together with this form the following must be sent:*

*- Candidate’s Curriculum Vitae;*

*- Document proving the necessary powers of the candidate to act as Clearing Member Representative.*