

CERTIFIED PROVIDER

MEMBER APPLICATION



Please complete all sections. Please send the form as well as the additional information on the last page of this document to: EuroIRP, c/o Susan Westwood, 4th Floor, 35 Davies St, London W1K 4LS or email to sue.westwood@euroirp.com

1. General Information

Company Name _____

Main Contact Name _____

Title _____

Company Website Address _____

Company Address _____

Telephone () _____

Fax () _____

Email _____

2. Membership fee

Revenue above Euro 1million per annum – Membership fee £500 per annum

Revenue below Euro 1million per annum – Membership fee £200 per annum

Membership fee will be prorated throughout the year.

Please tick the box relevant to your company, sign the attestation and enclose a cheque accordingly, made payable to The European Association of Independent Research Providers. For electronic payment details please contact Sue Westwood (<mailto:sue.westwood@euroirp.com>).

3. Declaration of Independence

A Certified Provider Member must attest that they derive their revenue primarily from investors, and not from investment banking, underwriting or corporate broking, proprietary trading or market making, advisory or consultancy services for clients other than investors, or from companies that are the subject of this research.

I hereby confirm that the:

- Applicant is not in the business of providing investment banking services or company consulting services to publicly-traded companies; **True / False**
- Applicant is not affiliated with, or a subsidiary of, any entity that provides investment banking services or company consulting services to publicly-traded companies **True / False**
- Applicant's primary paying client base consists of investors and not of companies who are the subject of the applicant's research coverage; **True / False**
- Applicant is in good standing with all relevant regulatory authorities. **True / False**

If the applicant has responded "False" to any of these questions, please give details of why.

The undersigned confirms the accuracy of these statements.

Name _____

Title _____

Date _____

4. Additional Information

We would be grateful if members would send us a brief background, maximum 100 words, that we can use on the www.euroirp.com website. Please use below space.

Please could members also let us know if they are regulated, and if so by which bodies, and whether their clients are institutional or individual investors.

It would be useful if applicants could enclose a sample of their research so we understand more about our members.

Please refer any questions you may have to Sue Westwood in the first instance.

sue.westwood@euroirp.com

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