

LuxCMA is Luxembourg's first association exclusively focused on Capital Markets industry.

The LuxCMA represents the common interests of all stakeholders of the primary capital markets industry of Luxembourg.

All our members actively contribute to the success of our association, and we welcome all interested parties to become a part of LuxCMA.

To apply for membership, please complete all questions below:

Company/Organisation details:
Name of the Company/Organisation
Corporate form
Country of Registration
RCS Number or other registration number:
VAT number:
Company Address:
Telephone:
Email address:
Website address:



Designated Representative Information

First Name and Last Name of the Permanent Representative ¹ :	
Position/Title:	
Phone number of the Permanent Representative:	
E-mail address of the Permanent Representative:	
Optional - Alternate Representative Information	on
Optional - Alternate Representative Information First Name and Last Name:	on
	on
First Name and Last Name:	on
First Name and Last Name:	on
First Name and Last Name: Position/Title: Phone number:	on
First Name and Last Name: Position/Title:	on

¹ means a person appointed to represent the corporate member in accordance with Article 5 of the <u>Articles</u> of Association.



Invoicing information

Invoice Recipient Name (if different from Primary Contact)					
Invoice address:					
Phone number:					
E-mail address:					
Purchase order (PO) information					
Is a Purchase Order required? (Yes/No):					
If Yes, please provide PO details:	PO Number: Date Issued:				
Corporate category					
Please select the appropriate category for your company:					
 □ Operating Industry (e.g., Banks, Brokers, Market Operators) □ Corporate Service Providers (e.g., Accounting Firms) □ Law Firms □ Auditors/Consultants/Tax Advisors 					
Additional Documents (for Corporate Members)					
Please attach the following documents:					
 □ Company statutes; □ Recent trade register extract; □ Most recent annual report (or balance sh □ Staff headcount information. 	eet, if unavailable);				



Agreement

info@luxcma.lu.

By signing this form, the Applicant:

(a) expresses its/her/his wish to become a member of the Association;

____, on _

- (b) confirms to have read the Articles of the Association and agrees to be bound by them and by any other internal document adopted by the Association;
- (c) undertakes to make the membership contribution (in the amount of EUR 5.000,-in the case of a corporate membership) as soon as practicable upon acceptance of this application (payment details will be provided together with the notification of such acceptance).

Organis	sation:										
Name:											
Positior	ղ։										
Please	send	the	complete	and	duly	signed	Membership	Subscription	Form	to	

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