

MEMBER REQUEST TO CHANGE LICENSEE AREA

I wish to transfer my Empire Trade UK membership acco	unt number,
in the name of	, to the
licensee area of	I confirm that I have
remained in my original licensed area,	, for
not less than eight weeks, and understand that this transf	er will not take place until all
outstanding cash fees on my account have been paid to He	ead Office.
By co-signing this form, both the existing licensee and lice	nsee to whom the member is
transferring, understand that this transfer will not take eff	ect until all outstanding cash
fees on the member's account have been paid under the o	riginal licensee area.
Name:	
(Empire Trade UK Account Owner)	
Authorised Signatory	Date:
Name: (Original Licensee)	
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Authorised Signatory	Date:
Name: (New Licensee)	
Authorised Signatory	Date:

This form, together with payment for all outstanding cash fees, must be mailed to the Empire Trade UK Head Office C/o Postbus 317, 9200 AH, Drachten, Netherlands, before the transfer will take place.