

GCX MEMBERSHIP APPLICATION REQUIREMENTS

INSTRUCTIONS

- 1. Please read the Terms and Conditions carefully.
- 2. Complete the Membership Application, attaching any required documents along with the application.
- 3. Please send this application form to one of the GCX office addresses listed in the last page. You will be notified once your application is received.

KEY NOTES

- 1. Approval of Membership Application will take fifteen (15) working days from the day that all the required documents are received by the GCX Membership Manager.
- 2. Once the membership application is approved, the applicant will be required to undertake a Membership Training, after which the applicant shall be entitled to the following:
 - A GCX membership number
 - A GCX ID Card
 - A GCX Certificate.

TERMS AND CONDITIONS FOR MEMBERSHIP AT THE GCX

- 1. GCX Membership types:
 - 1. Trading Member (TM)
 - i. Trades for self only and clears for self and /or others.
 - 2. Broking Member (BM)
 - i. Trades for himself and client.
 - 3. Institutional Member (IM)
 - i. Non-commercial actors who trade and clear for self and others (clients).
 - 4. Associate Members (AM)
 - i. Trade for themselves but cannot clear.
 - 5. Clearing Member (CM)
 - i. Clears on behalf of Associate Members
- 2. Associate Members (AM) must appoint a Clearing Member (CM) to clear for them.

- 3. An applicant shall submit this application form along with the following documents, (duly attested by the applicant), which are a part of the membership criteria:
 - a) Certified copy of Company / Cooperative Registration Certificate;
 - b) Certified copy of Regulations;
 - c) Board Resolution on appointing authorized signatories;
 - d) Education qualification certificates of authorized signatories, certified by a Notary public officer if any;
 - e) Proof of experience of the authorized signatories in the form of CVs if any;
 - f) Address, communication details of the authorized signatories (National ID card/Passport copy, telephone, cell, and email.);
 - g) Bank account details and a current Bank Statement displaying the past 6 months;
 - h) Tax Identification Number/ VAT registration certificate;
 - i) Two latest passport size colored photographs for authorized person(s);
 - j) Current police report of the authorized signatories;
 - k) Latest Auditors Report; and
 - 1) Any other document, as may be specified by the Exchange.
- 4. An applicant shall submit a Sign on and processing fee as specified herein the application form. In the case that this processing fee is not paid, GCX reserves the right to reject this Membership Application.
- 5. GCX reserves the right to accept or reject any Membership Application, or amend the Terms and Conditions without assigning any reason whatsoever.
- 6. Membership shall be subject to renewal every two (2) years on GCX applicable rate.

PROPOSED 2018 GCX MEMBERSHIP FEES - Subject to approval/renewal by GCX Board and Market Council

Trader Type	Admission Fee	Annual Renewal	Membership Application
		Fee	Processing Fee
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Trading Member	TBD	1000USD	50GHC
Brokering Member	TBD	500USD	50GHC
Institutional Member	TBD	500USD	50GHC
Associate Member	TBD	200USD	20GHC
Clearing Member	TBD	500USD	50GHC
Special rates for	TBD	1000USD	50GHC
Financial Institutions			
Farmers less than 100	TBD	200USD	20GHC
Farmer more than 100	TBD	500USD	20GHC

GCX MEMBERSHIP APPLICATION FORM

GCX MEMBERSHIP APPLICATION FORM

CATEGORY OF MEMBERSHIP *Instructions: Please tick the appropriate GCX Membership type you are seeking.* **Trading Member Broking Member Instituitional Member Associate Member Clearing Member** TYPE OF TRADER *Instructions: Please tick the appropriate type of Trader that you are seeking.* Ceritified Broker Regional Trader National Trader Large-Size Cooperatives (more than 100 members) Small-Size Cooperatives (up to 100 members) П TYPE OF INDUSTRY *Instructions: Please tick the industry that best matches your industry type. Please place only one* checkmark, or provide your own industry type in the "Other" field. Financial Institution Processor Farming Cooperative Commodity Buyer Warehouse Operator Collateral Manager П Agro-Inputs Supplier □ **Fumigation Firm** Insurance Firm Transport Farmer Other: ___ **COMPANY DETAILS** Company Name: Physical Address: City: Country: Telephone: Email: Website:

GCX MEMBERSHIP APPLICATION FORM ABIDANCE BY GCX RULES AND REGULATIONS If accepted, do you agree to abide by the Rules and Regulations of the GCX? Yes No No

Please give the following details:

No.	Particulars	Yes	No
1.	Have you ever been pronounced guilty of a criminal offence involving		
	moral turpitude?		
2.	Have you ever been adjudged bankrupt or have been proved to be		
	insolvent at any time?		
3.	Have you ever been involved in litigations, suits, or proceedings or have		
	been involved in any financial liability of contingent or unascertained		
	nature?		
4.	Have you ever been at any time convicted of an offence involving fraud		
	or dishonesty of financial irregularities?		
5.	Has any disciplinary action been taken by any commodity/ stock		
	exchange against you or any other		
	partner/director/promoter/director/shareholder or employee of yours?		
6.	Have you ever been denied/ rejected membership of any commercial		
	organization /commodity or stock exchange? If yes, when?		
7.	Have you ever had a provisional liquidator or receiver or official		
	liquidator appointed by a competent court against you?		
8.	Have you committed any act against law which may render you liable to		
	be wound-up?		
9.	Have you ever been expelled / suspended / declared a defaulter on any		
	other commodity Stock exchange or have been debarred from trading in		
	commodities/ securities by any Regulator like Security and Exchange		
10	Commission?		
10.	Is there any court case pending against a shareholder / director /		
1.1	employee?		
11.	Have you been declared/ rendered incompetent to enter into contract		
10	under any law in force in Ghana?		
12.			
	the Exchange to ensure Compliance of different provisions of the law and		
	procedures?		
13	Which commodities are you interested in?		
13.	when commodutes are you interested in:		

We hereby declare that the details furnished above are true and correct to the best of our knowledge and belief and we undertake to inform you of any changes therein immediately.

In case any of the above information is found to be false or untrue or misleading or misrepresenting we are aware that we may be held liable for it.

We undertake that any misstatement or misrepresentation or suppression of facts in connection with this application for membership or breach of any undertaking or condition of admission to membership may entail rejection of our application or expulsion of our membership.

Signature:	
Name:	
Designation:	
Date:	

Please complete the form and submit it to:

The Membership, Outreach and Communications Manager

GCX,

Ministry of Business Development, 1st Floor Room 11- Ridge Accra Phone: +233 – 302- 937677

Email: info@gcx.com.gh Website: www.gcx.com.gh