

DORMAN TRADING, LLC

TRUST ACCOUNT APPLICATION

Name _____ Tax ID. _____
Address _____ Telephone No. (____) _____
City _____ State _____ Zip _____ Country _____
Date of Organization _____ State of Organization _____

Trustee _____ Soc. Sec.# _____
E-Mail _____ Telephone No. _____
Mailing Address (if different) _____

Trustee _____ Soc. Sec.# _____
E-Mail _____ Telephone No. _____
Mailing Address (if different) _____

Person Authorized to Trade _____ Soc. Sec.# _____
Home Address _____
City _____ State _____ Zip _____ Country _____
Bus. Tel. # _____ Cell # _____ E-Mail _____

Please attach a copy of the Trust Agreement and for each Trustee and beneficiary, please provide their Social Security number and a copy of their Drivers License or Passport

Type of Account: Speculative _____ Hedge _____
If this is a Hedge Account, please attach Hedge Form.

BANKING

Name of Bank _____ Account # _____
Address _____ Phone # _____
City _____ State _____ Zip _____ Country _____

BROKERS

Accounts with Other Brokers

Name of Broker _____ Account# _____
Address _____ City _____ State _____ Zip _____

Are any Trustees, members of any Exchange? If so please describe.
Are any Trustees, registered or previously registered with the NFA?
Are Trustees aware of the risks in futures trading?

Each Trustee must sign all Account Application forms.