

Authorised Operator form

Please use this form to authorise GO Markets Securities Pty Ltd (GO Markets) to provide information about your Share Trading account to a nominated Authorised Operator.

Account Name:

Account Number:

For this form to be submitted successfully, please fill out all information and attach a copy of all parties' Drivers Licenses for verification to operations.shares@gomarkets.com

Details of Authorised Operator

Name in Full:
(As appears on your Driver's License)

Date of Birth:

Residential Address:

Relationship to Account Holder:

Email Address:

Mobile Phone:

Signature:

Date:

Acknowledgement

By signing below, I/we:

- Authorise GO Markets Securities Pty Ltd ("GO Markets") to act on instructions received by telephone or email from the above Authorised Operator on all of my/our accounts to:
 - Place trades on my/our behalf;
 - Communicate with GO Markets' representatives about information regarding my/our account/s;
- Acknowledge that any instructions given by the Authorised Operator in accordance with this authority will be relied on by GO Markets and that GO Markets will not be liable for any loss or damage I/we, or anyone else, suffers where GO Markets acts on those instructions in good faith.
- Acknowledge that it is my/our responsibility to be aware of any activity undertaken on my/our behalf by the Authorised Operator in relation to the instructions provided on GO Markets products.
- Understand that this authority does not allow the Authorised Representative to change any of my/our personal details. (ie: name/s, DOB's, Address, Bank Account).
- Acknowledge that I/we can revoke this authority by contacting GO Markets at any time/in writing at any time.
- Agree to using my/our details in accordance with GO Markets Privacy Policy.

Primary Account Holder Full Name:

Signature:

Date:

Secondary Account Holder (if applicable) Full Name:

Signature:

Date:

All existing account holders must sign this form for your instructions to be executed. **No e-signatures.**