



Solid Financial Services Ltd

Change of Client Categorization Request Form

Client's name		
Account number		
Please select your requested categorization:	Retail Client	
	Professional Client	
	Eligible Counterparty	

If you have selected "Professional Client" above, please select two or more of the following qualification criteria which apply to you:

Elective Professional Client:	During the past year I carried out large transactions in average frequency of more than 10 per quarter	
	The size of my financial instrument portfolio, defined as including cash deposits and financial instruments, exceeds EUR 500,000	
	I work or have worked in the financial sector for at least one year in a professional position, which requires knowledge of the transactions or services envisaged.	
	Please provide below the in-depth description of your professional experience (Company/Department/Period of employment/Job title or position) and how it gave you exposure to derivatives or leveraged FX and CFD trading services:	



Solid Financial Services Ltd

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I/we hereby confirm that I/we have read and understood the Client Categorization Policy and understand the implications of my/our requested categorization, including losing some of the protection afforded and compensation under the Investor Compensation Fund ("ICF") for Clients of Investment Firms if moving from a Retail to a Professional Client.

I/we formally request that Solid Financial Services Ltd reclassify me/us to my/our preferred client categorization as above.

For Physical Persons:

Full name of the person: _____

Contact email address: _____

Contact telephone number: _____

Date: _____

Signature: _____

For Corporate clients:

On behalf of (Company name): _____

Full name of authorized person: _____

Contact email address: _____

Contact telephone number: _____

Date: _____

Signature: _____