



**LeadCapital**

**(Member of The Nigerian Stock Exchange)**  
**Children's Account Opening Form**



Child's Picture



Parent/Guardian's Picture

**ACCOUNT OPENING FORM**

*Thank you for choosing LeadCapital Limited. Kindly fill out this account opening form carefully.*

**CHILD'S DETAILS**

NAME (SURNAME FIRST): .....

DATE OF BIRTH:..... SEX .....

(Please attach photocopy of birth certificate)

NATIONALITY:.....

RESIDENTIAL ADDRESS:.....

..... E-MAIL .....

SCHOOL ADDRESS:.....

(Where Applicable)

**PARENT/GUARDIAN'S DETAILS (to be completed by the sponsor opening the account)**

NAME OF PARENT/GUARDIAN (Surname First).....

RESIDENTIAL ADDRESS:.....

.....

OCCUPATION/BUSINESS:.....

TELEPHONE NUMBER:..... EMAIL:.....

PASSPORT NUMBER/ DRIVERS LICENCE:.....

(Please attach photocopy)

NAME AND ADDRESS OF NEXT OF KIN:.....

.....

.....

**CUSTOMER DECLARATION**

**YOUR AGREEMENT WITH US:** By signing below I/We the parent(s) guardian(s) of the child named in this application form is/are; (i) applying to LeadCapital for the opening of a minor's stock broking account on behalf a child; (ii) confirming that any details supplied are true and complete; (iii) confirming that I shall represent the said minor in all future transactions of any description in the account until the said minor attains maturity; (iv) I/we indemnify LeadCapital against any claim of above minor for any withdrawal/transactions made by me/us in his/her account(s); (v) agreeing to be bound by the terms and conditions governing the operation for the account.

PARENT/GUARDIAN'S SIGNATURE& DATE:.....

**PLEASE TICK LEADCAPITAL REPORTS YOU WOULD LIKE TO RECEIVE:**

**LEAD DAILY REPORT**

**LEAD WEEKLY REPORT**

**OTHER AVAILABLE REPORTS**

**FOR OFFICIAL USE ONLY**

**INITIAL INVESTMENT AMOUNT:**.....

**OPERATIONS VERIFICATION:**.....

**RELATIONSHIP OFFICER:**.....

**RELATIONSHIP OFFICER'S COMMENTS:**.....

.....

.....

.....

**SIGNATURE:**.....

**CHECK ACCOUNT OPENING DOCUMENTS:**

**PLEASE CHECK**

- |  |                          |
|--|--------------------------|
| 1. PHOTOCOPY OF PARENT/GUARDIAN'S INTERNATIONAL PASSPORT OR DRIVER'S LICENCE | <input type="checkbox"/> |
| 2. PHOTOCOPY OF CHILD'S INTERNATIONAL PASSPORT (Where available)             | <input type="checkbox"/> |
| 3. RECEIPT OF PASSPORT PHOTOGRAPH OF CHILD AND PARENT/GUARDIAN               | <input type="checkbox"/> |
| 4. RECEIPT OF CHILD'S BIRTH CERTIFICATE                                      | <input type="checkbox"/> |
| 5. COMPLETED ACCOUNT OPENING FORM  | <input type="checkbox"/> |
| 6. COMPLETED CSCS FORM   | <input type="checkbox"/> |

**ACCOUNT OPENING AUTHORISED BY :**.....

**DATE:**.....

**CSCS Number:** .....