

iBond and/or Mark-to-Market Application Form
for ThaiBMA Ordinary Member

Date _____

_____ would like to subscribe an Intelligent Bond Solution (iBond) service. and/or Mark-to-Market Service. A completed and signed application form and all required supporting materials are enclosed:

1. A copy of the Certification of Company's Registration
2. Power of attorney (if any)

Company name (TH) _____ Abbreviation Name _____

Company Name (EN) _____

Address (TH) _____

Address (EN) _____

Type of business _____

Juristic Person Registration No _____

Type of Member ☒ ThaiBMA Member ☐ ThaiBMA Non-Member

Subscription Period From _____ To _____

Authorized Representative(s)

1. Prefix _____ Name-Surname _____ Position _____

2. Prefix _____ Name-Surname _____ Position _____

Witness

Prefix _____ Name-Surname _____

Coordinator Contact

Prefix (EN) _____ Name-Surname (EN) _____

Prefix (TH) _____ Name-Surname (TH) _____

Position _____ Department _____

Tel _____ Fax _____ E-mail _____

Please mark the items you would like to subscribe

iBond	Authorized Users	Annual Fee	Additional Users
<input type="checkbox"/> iBond	6 th	90,000 Users 9,000/Additional User
Mark-to-Market	Access Time	Annual Fee	Additional Users
End-of-Day Mark-to-Market	- 5.30 pm (Regular trading day)	<input type="checkbox"/> For iBond Subscribers THB 125,000/ 6 Users Users 12,500/Additional User
	- 6.00 pm (The 15th and the last trading day of the month)	<input type="checkbox"/> For iBond Non-Subscribers THB 125,000/ 1 User Users 12,500/Additional User
Mark-to-Market 2 Hours lagged	7.00 pm	<input type="checkbox"/> For iBond Subscribers No Charge (Show Mark-to-Market Price for all registered bond)	
		<input type="checkbox"/> For iBond Non-Subscribers No Charge/ 1 User (Show Mark-to-Market Price for all registered bond)	

Remarks

1. The stated fees do not include Value Added Tax (VAT).
2. The information provided in this application form is preliminary and will be used to calculate fees and will be included in the subsequent iBond and/or Mark-to-Market license agreement.
3. ThaiBMA reserves the right to approve or reject any application at its sole discretion.
4. ThaiBMA reserves the right to suspend the service if the applicant fails to pay the fees or sign the agreement within the specified timeframe.
5. If ThaiBMA discovers that you have used the information and/or services for purposes other than those stated, or have modified, adapted, or distributed them without ThaiBMA's prior written consent, ThaiBMA reserves the right to take any appropriate action.
6. For further inquiries, please contact Bond Pricing and Product Development Department at pricing@thaibma.or.th or 02-655-6000 ext. 451-456

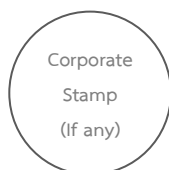
Payment Method

Money transfer (TR) to "The Thai Bond Market Association" Saving A/C 001-5-64527-7 at The Siam Commercial Bank PCL., Chidlom Branch. Please fax us a copy of the deposit slip or any proof of payment to account@thaibma.or.th

Authorized Users

1. Prefix (EN) _____	Name-Surname (EN) _____
Prefix (TH) _____	Name-Surname (TH) _____
Position _____	Department _____
Tel. _____	Fax. _____ E-mail _____
2. Prefix (EN) _____	Name-Surname (EN) _____
Prefix (TH) _____	Name-Surname (TH) _____
Position _____	Department _____
Tel. _____	Fax. _____ E-mail _____
3. Prefix (EN) _____	Name-Surname (EN) _____
Prefix (TH) _____	Name-Surname (TH) _____
Position _____	Department _____
Tel. _____	Fax. _____ E-mail _____
4. Prefix (EN) _____	Name-Surname (EN) _____
Prefix (TH) _____	Name-Surname (TH) _____
Position _____	Department _____
Tel. _____	Fax. _____ E-mail _____
5. Prefix (EN) _____	Name-Surname (EN) _____
Prefix (TH) _____	Name-Surname (TH) _____
Position _____	Department _____
Tel. _____	Fax. _____ E-mail _____
6. Prefix (EN) _____	Name-Surname (EN) _____
Prefix (TH) _____	Name-Surname (TH) _____
Position _____	Department _____
Tel. _____	Fax. _____ E-mail _____

The subscriber and the users have read, understood, and acknowledged ThaiBMA's privacy notice.
The Privacy Notice is available at <https://www.thaibma.or.th/pdf/2021/PrivacyNotice.pdf>



..... Authorized Representative(s)
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