Market Maker Registration Application

Members applying to become Market Makers registered with Dream Exchange Holdings, Inc. (the "Exchange") are required to complete this Market Maker Registration Application. The Exchange may require additional information from any Applicant prior to determining whether to register such Applicant as a Market Maker.

To apply, please complete this Market Maker Registration Application and submit with all required supplementary materials via email to MemberServices@DreamEx.com.

Applicants are required to update any information submitted in the application when and if it becomes inaccurate or incomplete after submission.

GENERAL INFORMATION		
Date:	CRD #:	
Name of Applicant:		
Address of Principal Office:		
City:	State:	Zip:

APPLICATION CONTACT	
Name:	Title:
Phone:	Email:

OTHER BUSINESS ACTIVITIES

☐ Investment
☐ Banking Market Maker
☐ Public Securities Business
☐ Dealer/Specialist
☐ Proprietary Trading
☐ Other: _____

If the Applicant is a Market Maker or Dealer/Specialist, please provide a list of the registered national securities exchange(s) or association(s) on which the Applicant has been approved as such:

SECURITIES

Estimate the number of securities in which the Applicant intends to become registered as a Market Maker: _____

NET CAPITAL

Excess Net Capital Amount:_____ As of Date: _____

Source of Net Capital: _____

☐ Most recent FOCUS Report enclosed - required

MARKET MAKER AUTHORIZED TRADERS
To be eligible for registration as a Market Maker Authorized Trader ("MMAT"), as defined in Exchange Rule 1.5, a person must successfully complete proficiency examinations and continuing education requirements applicable to Authorized Traders, as set forth in Interpretation and Policies .01 and .02 to Exchange Rule 2.5[1]. Market Makers must maintain a current list of MMATs who are permitted to enter orders on behalf of the Market Maker pursuant to Exchange Rule 11.20(a)(iv).
Name: _____ CRD #: _____ Date of Employment: _____ ☐ Series 7 Qualification ☐ Series 57 Qualification
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The undersigned attests that the information provided in this application on behalf of the Applicant is complete and accurate. Furthermore, the undersigned acknowledges that the Applicant agrees to update the application as necessary, and to abide by all rules of the Exchange, and interpretations thereof, as they currently exist and as they may be added, supplemented and/or amended from time to time.

_____

Signature of Authorized Officer, Partner or Managing Member or Sole Proprietor

_____

Printed Name

_____

Title

_____

Date

[1] *In exceptional cases and where good cause is shown, the Exchange may waive such requirement. Contact Member Services at 312.236.6752 for more information regarding requesting a waiver of the proficiency exam requirement.*