

POWER OF ATTORNEY

The account holder(s) (hereinafter referred to as «the Account Holder») hereby appoint(s) the following person(s) as authorised representative(s) (hereinafter referred to as «the Authorised Representative”) for the accounts opened with Strateo, Geneva, Branch of Keytrade Bank SA, Brussels (hereinafter referred to as «the Bank»).

	AUTHORISED REPRESENTATIVE 1	AUTHORISED REPRESENTATIVE 2
	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss
Last name		
First name		
Civil status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated
Official domicile	Street N° Post code Town Country	Street N° Post code Town Country
Post within the legal person		
Private / mobile telephone number		
Work telephone number		
Professional e-mail address		
Date and place of birth		
Nationality		
Type of identity document (passport, identity card, etc.)		
Identity card/passport number valid until		
Politically exposed persons	<p>Do you hold, or have you held, a political office or public office at regional, national or international level?¹</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>Does the same apply to one of your close relatives (parents, children or partner)?</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If you have answered yes to one of the questions above, please provide the following information:</p> <p>Name of the person and relationship with you:</p> <p>Precise title of the office:</p> <p>Description and role of the office in hierarchical terms:</p> <p>Date on which office was taken up and date on which it was (or will be) relinquished :</p>	<p>Do you hold, or have you held, a political office or public office at regional, national or international level?²</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>Does the same apply to one of your close relatives (parents, children or partner)?</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If you have answered yes to one of the questions above, please provide the following information:</p> <p>Name of the person and relationship with you:</p> <p>Precise title of the office:</p> <p>Description and role of the office in hierarchical terms:</p> <p>Date on which office was taken up and date on which it was (or will be) relinquished :</p>
Specimen signature of the authorised representatives		

1 & 2) As a head of state, minister, Member of Parliament, leader of a political party represented in government, senior civil servant (judicial or executive power - including the army), manager of a national public body, senior politician or senior official of an international or supranational organisation, such as the EU or NATO, etc.

The Account Holder grants the aforementioned Authorised Representative the most extensive powers of representation, management, administration and disposal, without any restrictions, with regard to his/her contractual relationship with the Bank for the accounts opened with the Bank.

The Authorised Representative is authorised to represent the Account Holder alone.

Unless specified that a new Power of Attorney supplements or replaces a previous Power of Attorney, the latter shall remain in force, unless the Account Holder's intention to the contrary is evident from the circumstances.

The Account Holder hereby confirms the authenticity of the signature(s) of the Authorised Representative(s) above and the validity of the powers granted hereby.

The Account Holder hereby acknowledges as good and valid all deeds undertaken by the Authorised Representative within the limits of the powers granted and fully discharges the Bank, which, other than in the event of intentional wrong or gross negligence on its part and within the limits of the law, shall not accept any liability vis-à-vis the Account Holder or his/her legal heirs or any other third party. If so required, the Account Holder undertakes to discharge and guarantee the Bank against any claims against the Bank by any party.

This power of attorney is issued without right of substitution.

It alone governs the Authorised Representative's powers of representation vis-à-vis the Bank, regardless of the internal legal relationship between the Account Holder and his/her Authorised Representative.

This power of attorney remains in force until the Bank is in receipt of written revocation. It shall not expire upon the death of the Account Holder or for the other grounds for termination specified in Articles 35 and 405 of the Code of Obligations.

Moreover, the Bank's General Terms and Conditions apply, particularly with regard to the governing law (Swiss law) and jurisdiction (the courts of Geneva).

Place and date

Signature of authorised signatory(ies)
according to the Trade Register
