

Membership Application Form

1. Company Details	1.	Com	pany	Detail
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Company Name	
Contact Person	
Job Title	
E-mail address	
Address	
Postcode	
Tel. No	
Fax No	
VAT No	
Website	
Date of	
establishment/	
Incorporation &	
category of license	
Place of	
Establishment/	
Incorporation	

2. Affiliated Companies

Please complete this section if you form part of a Group of Companies

Group Name	
Website	
Date of	
establishment/	
Incorporation &	
category of license	
Place of	
Establishment/	
Incorporation	





3. Other Memberships

4. Area of Activity						
Service Providers to Collective Investment Schemes						
(Please tick as appropriate)						
□ Investment Manager						
□ Administration Services						
□ Custody Services						
□ Audit Firm						
□ Legal Firm						
Representative in Malta of an Overseas Collective Investment Scheme						
□ Risk and Compliance Services □ Distributor in Malta of an Overseas Collective Investment Scheme						
Directors of Collective Investment SchemeStockbroker and/or Wealth Manager						
□ Other service providers to funds (Please specify)						
5. Assets under Management/ Administration/ Distribution/ Custody (if applicable)						
Places tiek as appropriate						
Please tick as appropriate □ <€ 25mn						
□ <€ 25mn □ € 100mn − € 250mn □ € 750mn − € 1bn □ € 25mn − € 50mn □ >€ 1bn						
□ € 50mn − € 100mn □ € 500mn − € 750mn □ Other						





6. Fees

Membership Fee: €300 per annum

1st year charged on a pro-rata basis

Kindly send the filled-in form to info@masa.mt and an original copy to:

Malta Asset Servicing Association c/o Fexserv Fund services NuBis Centre Mosta Road Lija, LJA 9012

7. Authorisation

Name	Signature	
Position	Date	

Thank you for your application.

