

ACCOUNT NUMBER(S)

Application Form for Options Upgrade

To: Scotia iTRADE, a
division of
Scotia Capital Inc.

I/We request to have our Scotia iTRADE® account approved for options trading.

I/We have received copies of the Scotia iTRADE Terms and Conditions brochure, including the Client Account and Margin Agreement and the Options Account Agreement which explains the operation of options trading accounts at Scotia iTRADE. We have read and understood all of the terms and conditions in the relevant agreements and agree to the terms and conditions set forth therein.

I/We provide the following updated Financial and Investment information to Scotia iTRADE to ensure that Scotia iTRADE has current and accurate information on my/our account:

Past Investment Experience	Option Investment Knowledge	Net Worth
Stocks <input type="checkbox"/>	Low _____	Net Fixed Assets \$ _____
Bonds <input type="checkbox"/>	Medium _____	Net Liquid Assets \$ _____
Options <input type="checkbox"/>	High _____	Total Net Worth \$ _____
Futures <input type="checkbox"/>		

How long have you been investing in options? _____ Years

Account Holder Employment Information

Employment Status

☐ Employed ☐ Homemaker ☐ Self Employed
☐ Student ☐ Unemployed ☐ Retired

*If Retired, we require previous employment information

Employer _____

Industry _____

Position / Occupation _____

Years with Employer _____

Joint Holder Employment Information

Employment Status

☐ Employed ☐ Homemaker ☐ Self Employed
☐ Student ☐ Unemployed ☐ Retired

*If Retired, we require previous employment information

Employer _____

Industry _____

Position / Occupation _____

Years with Employer _____

Proposed Option Activity

<input type="checkbox"/> Covered Writing	<input type="checkbox"/> Purchase call & puts Covered Writing	<input type="checkbox"/> *Available in Margin accounts only Spreads Purchase call & puts Covered Writing	<input type="checkbox"/> *Available in Margin accounts only Naked put writing Spreads Purchase call & puts Covered Writing
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Account Holder Name

Joint Holder Name

Account Holder Signature

Joint Holder Signature

Date

Date