



The Security Traders Association of New York, Inc.

2015 Membership Application

Name _____
First Last

Date of Birth ____/____/____ Male ____ Female ____ Single ____ Married ____

Home Address _____

Home Phone _____ Cell Phone _____

Personal email address: _____ Work email address: _____
(Work email will be used to log into the website and to receive STANY emails & Notices unless otherwise specified.)

Firm: _____ Title _____

Firm Address _____

City, State Zip _____

Business Phone# _____

Date applicant became employed at current Firm _____

Previous employment (include education if applicable)

Firm _____ Title _____

Dates of Employment _____

Firm _____ Title _____

Dates of Employment _____

Are you regularly engaged in the execution or commitment of securities? Yes ____ No ____

If yes, please describe the nature of the trading in which you engage _____

If no, explain in what capacity you are employed in the securities industry and how your employment relates to Trading _____

Date applicant started to make regular commitments or execute orders in the securities industry or date applicant first became employed in a capacity which assists supports or is related to trading: _____

Check here if you are employed by an NASD or NYSE member firm and if you are duly registered _____

Please list any securities related exams passed and the dates passed _____

If your firm's status does not allow you to be registered, check here _____

Have you ever been named in any proceeding brought by any securities self-regulatory organization, state securities commission or agency, or the SEC or CFTC which found that you violated any law rule or regulation or which imposed any disciplinary sanction against you? Yes ____ No ____ If Yes, please explain _____

Has any firm with which you have been associated been subject to such a finding or disciplinary sanction which was imposed on such firm directly or indirectly as a consequence of any conduct on your part? Yes _____ No _____ If yes, please explain _____

Are you or is any such firm currently subject to any proceeding in which the allegations could result in such finding or disciplinary sanction? Yes _____ No _____ If yes, please explain _____

PLEASE CHECK ALL THAT APPLY:

Firm Related Questions

<u>Type of firm:</u>	Buy Side	<input type="checkbox"/>	Sell Side	<input type="checkbox"/>	Market Center	<input type="checkbox"/>	ATS	<input type="checkbox"/>	Broker/Dealer	<input type="checkbox"/>
	Vendor/System Provider	<input type="checkbox"/>	Hedge Fund	<input type="checkbox"/>	Research Boutique	<input type="checkbox"/>	Investment Bank	<input type="checkbox"/>	Regional Bank	<input type="checkbox"/>
	Clearing Firm	<input type="checkbox"/>	Legal	<input type="checkbox"/>	Regulator	<input type="checkbox"/>	Other	<input type="checkbox"/>	_____	<input type="checkbox"/>
<u>Trading Style:</u>	Agency	<input type="checkbox"/>	Principal	<input type="checkbox"/>	Both	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<u>Trading Strategy:</u>	Long/Short	<input type="checkbox"/>	Long Only	<input type="checkbox"/>	Short Only	<input type="checkbox"/>	HFT	<input type="checkbox"/>		<input type="checkbox"/>
<u>Products Traded:</u>	Equities	<input type="checkbox"/>	Options	<input type="checkbox"/>	Futures	<input type="checkbox"/>	Fixed Income	<input type="checkbox"/>		<input type="checkbox"/>
<u>Market Coverage:</u>	Domestic	<input type="checkbox"/>	International	<input type="checkbox"/>	Both	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

Applicant Related Questions

<u>Your Role:</u>	Market Maker	<input type="checkbox"/>	Sales Trader	<input type="checkbox"/>	Electronic Trading	<input type="checkbox"/>	Compliance/Legal	<input type="checkbox"/>	Research	<input type="checkbox"/>
	Institutional Money Mgmt.	<input type="checkbox"/>	Sales	<input type="checkbox"/>	Technology	<input type="checkbox"/>	Buy Side Trader	<input type="checkbox"/>	Sell Side Trader	<input type="checkbox"/>
	Head of Desk	<input type="checkbox"/>	Portfolio Mgmt.	<input type="checkbox"/>	Operations	<input type="checkbox"/>	Other	<input type="checkbox"/>	_____	<input type="checkbox"/>
<u>Product Coverage:</u>	High Touch	<input type="checkbox"/>	DMA	<input type="checkbox"/>	PT	<input type="checkbox"/>	HFT	<input type="checkbox"/>	Algo	<input type="checkbox"/>
<u>Interests:</u>	Electronic Trading	<input type="checkbox"/>	Technology	<input type="checkbox"/>	Dark Pools	<input type="checkbox"/>	Algorithms	<input type="checkbox"/>	Compliance	<input type="checkbox"/>
	Research	<input type="checkbox"/>	International	<input type="checkbox"/>	Market Centers	<input type="checkbox"/>	HFT	<input type="checkbox"/>	_____	<input type="checkbox"/>

If additional space is required for any response, please attach a separate sheet.

“I, the sponsor, find the above applicant to be a solid professional whom I can easily sponsor, knowing full well that this individual is of the character and integrity that will contribute to this Association.”

“We, the applicant and Sponsors, hereby declare that the answers to the statements contained herein are true and correct.”
(Failure to answer truthfully may result in the rejection of membership and/or termination of existing membership.)

Primary sponsor _____ Firm _____

Secondary Sponsor _____ Firm _____

Total Due \$275 by Check or \$282 if paid by credit card or on-line.

Payments: Check or Credit Card (Visa, MasterCard, Discover, American Express)

Cardholder's Name _____ Card Type _____

Card # _____ Exp. Date _____

Signature _____

Mail to STANY, 79 Madison Ave., 2nd Floor, New York, NY 10016 or email to kimu@stany.org