## **HOW TO APPLY**

To apply for EMTA Membership, please fill out the attached page and return to Suzette Ortiz of EMTA at <a href="mailto:sortiz@emta.org">sortiz@emta.org</a>.

Payment instructions for EMTA Membership follow. Membership will be activated once Annual Dues are received.

#### PAYMENT OF ANNUAL DUES

Membership Dues may be paid either by wire transfer or by check.

If paying by wire transfer\*, please forward your payment to our account as follows:

Citibank, N.A., Branch 9 460 Park Avenue New York, NY 10022

Routing number: 021000089 Swift Code: CitiUS33 Account (IMMA): 9930218875

If paying by check, please make your check payable to the order of EMTA and send by mail or by hand to:

EMTA
405 Lexington Avenue
Suite 5304
New York, New York 10174
Attention: Suzette Ortiz

### CONDITIONS OF USE OF EMTA'S USER ID AND PASSWORD

Authorized representatives and employees of EMTA Members will be given a confidential user id and password entitling them to access Members Only Content. By using this user id and password, each such person confirms that at each time such person accesses Members Only Content (i) such person is an authorized representative or employee of a current EMTA Member, (ii) such person will treat this information as confidential, (iii) such person has not and will not share this user id or password information with any person outside of his or her Member organization, and (iv) such person will notify EMTA immediately if such person becomes aware of any unauthorized use of such person's user id and password information.

<sup>\*</sup> Please top up for any bank service charges.

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# **EMTA Membership Form**

Please 'X' the Membership category you are eligible for and forward the Annual Dues for that Membership according to the attached instructions

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	/\330012							
NAME:	-							
COMPA	NY NAME:							
ADDRESS:								
CITY. ST	CITY, STATE ZIP							
•	COUNTRY							
	•							
Please 'X' the topics of interest for purposes of receiving updates and information:								
	Interest C Africa	Group:		_				
	Local Markets: Asia Central/Eastern Europe Latin America			- - -				

Date							
Mont	th day	year					
Primary Contact (1 per institution) Additional Contact							
Additional Contact							
PHONE:							
FAX:							
E-MAIL:							
WEBSITE:							
Position:	Business Manag Compliance Investment Mana Legal Press		Research Risk/Credit Settlement/Ops Trading/Sales Vendor				
Please 'X' the topics if you would like to <b>actively participate</b> in an EMTA Working Group. For more information about EMTA's Working Groups,							

see http://www.emta.org/template.aspx?id=105.

Bonds and Loans	
FX and Currency Derivatives	
Legal and Compliance	

#### **VOLUME SURVEY PARTICIPATION**

All EMTA Member Firms that trade EM debt are expected to participate in EMTA's quarterly volume surveys. To assist us in involving your firm in the survey process as quickly as possible, please fill in the information below. If your firm does not buy or sell EM debt securities, please X the box below. For Volume Survey questions, please contact Jonathan Murno at +1 646 676 4293 or at imurno@emta.org.

Volume Survey contact: E-mail address: Phone number:

[ ] My firm does not buy or sell EM debt securities.

Please return this form to Suzette Ortiz via e-mail sortiz@emta.org.