

# Tradeguard

## Request Form

Please email the completed form to [nfxops@nasdaq.com](mailto:nfxops@nasdaq.com).

### Participant

Firm Name		MPID (SENDERCOMPID)	
Contact Person			
Tel. Number		Email Address	
Name In Print		Title In Print	
Signature Of Requestor		Date	

### User 1

Owner Name			
Tel. Number		Email Address	
Environment	<input type="checkbox"/> Test 1	<input type="checkbox"/> Production	
Access	<input type="checkbox"/> Full Access	<input type="checkbox"/> Read Only	

### User 2

Owner Name			
Tel. Number		Email Address	
Environment	<input type="checkbox"/> Test 1	<input type="checkbox"/> Production	
Access	<input type="checkbox"/> Full Access	<input type="checkbox"/> Read Only	

\*For additional users, please use appendix.

### Only For NFX Market Operations Record

REVIEWED AND SET UP BY			
Signature		Date	

## Appendix

### User 3

Owner Name			
Tel. Number		Email Address	
Environment	<input type="checkbox"/> Test 1	<input type="checkbox"/> Production	
Access	<input type="checkbox"/> Full Access	<input type="checkbox"/> Read Only	

### User 4

Owner Name			
Tel. Number		Email Address	
Environment	<input type="checkbox"/> Test 1	<input type="checkbox"/> Production	
Access	<input type="checkbox"/> Full Access	<input type="checkbox"/> Read Only	

### User 5

Owner Name			
Tel. Number		Email Address	
Environment	<input type="checkbox"/> Test 1	<input type="checkbox"/> Production	
Access	<input type="checkbox"/> Full Access	<input type="checkbox"/> Read Only	

### User 6

Owner Name			
Tel. Number		Email Address	
Environment	<input type="checkbox"/> Test 1	<input type="checkbox"/> Production	
Access	<input type="checkbox"/> Full Access	<input type="checkbox"/> Read Only	