

**Relitrade Stock Broking Private Limited**

RELITRADE HOUSE, 2nd FLOOR, 'O' BLOCK, MONDEAL RETAIL PARK, S.G.HIGHWAY, AHMEDABAD - 380 059, GUJARAT, INDIA.

**FAMILY DECLARATION**

I and my family members hereby request you to that mobile number being Mobile and Email ID being Email ID, belonging to sole / first account holder shall be considered in your records for the purpose of receiving communication from Stock Exchanges or Depository with regard to details of trading / DP Transactions Executed through you.

Thus any communication relating to my / our trading and Demat account should be sent to the above mentioned mobile and email ID. This facility shall be extended to us as an exception, for our convenience of receiving transaction details at a single mobile and email ID.

I understand that for the purpose of availing the above facility “family” means self, spouse, dependent parents.

I / We all below signed Holders agrees to indemnify the Exchanges, depository and broker for any loss, harm, or breach of trust or any damages found in our any transaction which was executed by under signed members, We are bound to liable for this.

I/ We consent to Exchanges Depository and broker provider such information it’s pertaining to account transactions in my/our account as is necessary for the purposes of generating SMS and Email Alerts by broker, to be sent to the said mobile number.

Sr. No.	Holder(s) name	Relationship	Client CODE	Client ID	Sign
1.		<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent on Children <input type="checkbox"/> Dependent on Parents			
2.		<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent on Children <input type="checkbox"/> Dependent on Parents			
3.		<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent on Children <input type="checkbox"/> Dependent on Parents			
4.		<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent on Children <input type="checkbox"/> Dependent on Parents			