

1. Membership Admission Questionnaire

1. Application As¹

Full Member
(investor: GP/ LP)

Associate Member
(service provider)

2. Company Details

Company Name _____
Address _____
City _____
Postal Code _____
Country _____
Telephone _____
Fax _____
Company email _____
Website Address _____
Legal Structure _____

3. Type of Company / Organisation / Firm

General Partner / Management Company

- Independent VC / PE Fund Manager
- Subsidiary of international VC / PE Fund Manager
- Bank
- Financial Institution
- Government Institution
- Insurance Company
- Pension Fund Manager
- Other (please specify) _____

Limited Partner / Institutional Investor

- Asset Management Firm
- Bank
- Corporate Investor
- Endowment
- Foundation
- Fund of Fund
- Insurance Company
- Pension Fund
- Sovereign Wealth Fund

¹ For further information please refer to the Membership section of the LPEA website or the LPEA Mission Statement

Service Provider and other

- Accounting Firm
- Administrative Agent / Domiciliation
- Audit Firm
- Bank
- Consulting Firm (please specify field(s) of speciality) _____

- Other (please specify) _____
- Law Firm
- Placement agent
- Professional Association
- Other (please specify) _____

4. Staff Size (Luxembourg Office Only)

Total Number of Employees _____

Number of Employees involved in Private Equity _____

5. Description of your Company

Please provide a brief description of your activity in Luxembourg

General Partners & Limited Partners Only

Investment Focus (Primary Focus)

- | | |
|---|--|
| <input type="checkbox"/> Venture Equity | <input type="checkbox"/> Venture Debt |
| <input type="checkbox"/> Growth Equity | <input type="checkbox"/> Growth Debt |
| <input type="checkbox"/> Buyout Small | <input type="checkbox"/> Buyout Medium |
| <input type="checkbox"/> Mezzaine & Debt Financing | |
| <input type="checkbox"/> Micro Finance | |
| <input type="checkbox"/> Public to Private | |
| <input type="checkbox"/> Turnaround / Restructuring | |
| <input type="checkbox"/> Other (please specify) _____ | |

Investment Size

From _____ M€ to _____ M€

Industry Focus

- | | |
|--|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Consumer Services : Other |
| <input type="checkbox"/> Business & Industrial Products | <input type="checkbox"/> Energy & Environment |
| <input type="checkbox"/> Business & Industrial Services | <input type="checkbox"/> Financial Services |
| <input type="checkbox"/> Chemicals & Materials | <input type="checkbox"/> Life Services |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Other |
| <input type="checkbox"/> Computer & Consumer Electronics | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Consumer Goods & Retail | <input type="checkbox"/> All |

Service Providers Only

Service Focus (please indicate % of turnover related to Private Equity)

- | | |
|---|--|
| <input type="checkbox"/> Assurance _____% | <input type="checkbox"/> Central Administration _____% |
| <input type="checkbox"/> Accounting Services _____% | <input type="checkbox"/> Tax Services _____% |
| <input type="checkbox"/> Domiciliation _____% | <input type="checkbox"/> Legal Services _____% |
| <input type="checkbox"/> Custody _____% | <input type="checkbox"/> Placement Agency _____% |
| <input type="checkbox"/> Transfer Agency _____% | <input type="checkbox"/> Other (please specify) _____% |

6. Motivation

What objectives and expectations do you have in becoming a member of the LPEA?

How did you find out about the LPEA?

7. References

Please provide two references among the existing members of the LPEA that can be contacted by the LPEA.

First reference

Company Name	_____	Contact Person	_____
Email	_____	Phone	_____

Second reference

Company Name	_____	Contact Person	_____
Email	_____	Phone	_____

8. Contact Information

Principal Contact

Name	_____	Title	_____
Email	_____	Phone	_____

Other Contact

Name	_____	Title	_____
Email	_____	Phone	_____

By signing this form, you acknowledge and accept that your personal data is processed by LPEA for the purposes of assessing your application and managing your membership with LPEA (including your participation in technical committees, sending you information on the association, etc.). Your personal data may be communicated to third parties (such as service providers or business partners of LPEA to the extent necessary for the purposes referred to above) as well as to administrations and local authorities.

You have the right to access of your data at reasonable intervals free of charge and to request correction of your data. You may exercise these rights by sending a mail or e-mail to LPEA's registered office. Any modification of the above data must be notified by you to LPEA as soon as possible.

Date _____

Signature _____