

Agreement and any other agreement relating to Subscriber's receipt and use of Market Data, including, without limitation, the agreement between Vendor and Subscriber referred to in Section 3(a), the terms and conditions of this Agreement will prevail. If, for any reason, one or more provisions of this Agreement is held invalid, the other provisions of the Agreement shall remain in full force and effect.

BY TYPING YOUR NAME BELOW, YOU AGREE THAT THE FOLLOWING IS TRUE: (1) YOU REPRESENT THAT YOU HAVE ACTUAL AUTHORITY TO ENTER INTO THIS AGREEMENT ON BEHALF OF SUBSCRIBER; (2) THAT YOU HAVE READ THE TERMS STATED ABOVE; (3) YOU UNDERSTAND THE TERMS STATED ABOVE; (4) A PRINTOUT OF THE TERMS STATED ABOVE WILL CONSTITUTE A "WRITING" UNDER ANY APPLICABLE LAW OR REGULATION; AND (5) YOU AGREE TO ABIDE BY ALL THE TERMS OF THE AGREEMENT STATED ABOVE. BY TYPING YOUR NAME BELOW, YOU AGREE THAT THE INITIAL TERM OF THIS AGREEMENT WITH NirvanaTS, SHALL BE FOR ONE MONTH. THEREAFTER, THE TERM OF THIS AGREEMENT SHALL BE RENEWED SUCCESSIVELY FROM MONTH TO MONTH UNTIL THE SUBSCRIBER NOTIFIES NirvanaTS, INC OF TERMINATION BY EMAIL, LETTER OR TELEPHONE AND SUCH NOTIFICATION IS CONFIRMED BY E- MAIL RECEIPT FROM NirvanaTS, INC. FEES ARE DUE THROUGH THE END OF ANY MONTH IN WHICH THIS AGREEMENT IS TERMINATED.

Type name of subscriber and authorized representative below if you acknowledge and accept the forgoing terms. I acknowledge and accept the above terms.

|   |   |   |
|---|---|---|
| Trading Account Number                  | <input type="text"/>                    | Leave blank if do not have one but you will be liable for CME professional fees if blank. |
| Clearing Firm                           | <input type="text"/>                    | Leave blank if do not have one but you will be liable for CME professional fees if blank. |
| Name of Salesperson at the broker / FCM | <input type="text"/>                    | Optional.   |
| Signed                                  | <input type="text"/>                    |   |
| Date                                    | <input type="text" value="2023-07-05"/> |   |

Be sure to include  
your Clearing Firm (or Futures Broker) and your  
Futures Trading Account Number.

Submit

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