

**When to use this form:**

- To open a Stadia Capital Income Fund Account.
- To provide Stadia Capital with your Income Fund selection preferences.
- To provide Stadia Capital with your contact information.

## 1 Account Owner and Contact Information

We respect your privacy. Stadia Capital Group, LLC will use the information you provide to service your account, communicate with you and provide information about our services.

Owner #1 Name \_\_\_\_\_

Owner #2 Name (if applicable) \_\_\_\_\_

Preferred Phone Number \_\_\_\_\_

Preferred Email Address \_\_\_\_\_

Home/Legal Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## 2 Account Authorization

\_\_\_\_\_  
Account Owner #1 Signature

\_\_\_\_\_  
Today's Date (mm/dd/yyyy)

\_\_\_\_\_  
Account Owner #2 Signature (if applicable)

\_\_\_\_\_  
Today's Date (mm/dd/yyyy)