



BLOCK INC INVESTMENT

Unlock the Next Block Growth. Secure Blocks, Solid Future

Block Inc Investment is a digital asset investment firm focused on cryptocurrency and blockchain-based opportunities. Our objective is to achieve long-term growth through strategic investments, prudent risk management, and continuous market analysis in the evolving digital finance sector.

For additional information visit us on the web at www.blockincinvestment.com

Application Form

APPLICANT INFORMATION					
Title		Full Name			
Date of Birth			Gender		Marital Status
Occupation			Employer Name		

CONTACT INFORMATION					
Residential Address					
City			State		Zip Code
Phone Number			Email		

IDENTIFICATION DETAILS					
Type of Identification Submitted	Passport	Driver's License	State ID Card	Other	
ID Number					
Issue Date			Expiration Date		

EMPLOYMENT AND FINANCIAL INFORMATION									
Employment Status	Formally Employed	Self-Employed	Unemployed	Retired	Student				
Employer Company									
Annual Income Range	<\$20K	\$20K-\$50K	\$50K-\$100K	\$100K-\$250K	>\$250K				
Source of Funds	Salary	Business Income	Crypto Trading	Investment	Inheritance	Others			
Net Worth Estimate									

INVESTMENT DETAILS											
Amount to Invest											
Investment Product Chosen (please select one option)		General Investment		Income Generation		Real Estate		Education Savings		Retirement Planning	
Investment Purpose		Wealth Growth	Tuition Fee	Pension Plan		401(k) Rollovers & IRA Transfers		Others			
Base Currency		USD		BTC		USDT		ETH			
Investment Time Horizon		< 1 Year		1-3 Years		3-5 Years		More than 5 Years		Others	

RISK PROFILE											
Describe your Investment Knowledge		Beginner			Intermediate			Advance			
Prior Crypto Experience		None			<1 Year		1-3 Years		3+ Years		Others
Risk Tolerance		Conservative		Moderate		Aggressive					
Have you Invested Before?		Yes	No								

If Yes, please specify: _____

WITHDRAWAL DETAILS & WALLET									
Bank Name									
Account Name									
Account Number									
Routing/Sort Code									
Primary Wallet									

Note: Withdrawals will only be processed to wallets verified under your name for AML compliance.

BENEFICIARY INFORMATION

Full Name	
Relationship	
Date of Birth	
Phone Number	
Percentage Allocation	

DECLARATIONS AND AGREEMENTS

I hereby certify that all information provided in this application is true and correct to the best of my knowledge. I acknowledge that investing involves risks, including the possible loss of principal. I agree to comply with all applicable terms, conditions, and regulations governing my investment account.

Applicant Signature: _____ Date: _____

FOR OFFICE USE ONLY

Application Number: _____ Date Received: _____

Approved By: _____ Approved Date: _____

Remarks:.....
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