



CPA

CHARTERED
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ACCOUNTANTS
BRITISH COLUMBIA

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APPLICATION FOR ADMISSION BY EXAMINATION AS A MEMBER

After completing all membership admission requirements, complete and return this form with fee and attachments to CPABC by post or fax. DO NOT EMAIL. This membership admission date will be set after receipt of satisfactorily completed forms with appropriate fees. A letter confirming a new member's admission should be sent in approximately two weeks. A membership certificate follows, normally at the beginning of the next month. New members will be invoiced for the current year's annual membership fee (see a notice of the student annual dues if applicable).

I, _____
(Print full name in upper and lower case as it should appear on membership certificate)

make application for admission as a member of the Chartered Professional Accountants of British Columbia.

In support of this application, I certify that I have completed the prescribed requirements, in accordance with the Bylaw Regulations, have passed the Uniform Final Examination in 20____, and

I enclose

_____ Certificate of Character

_____ completed Declaration of Completion of Optional P.D. Requirements from each employer while taking the required Mandatory P.D. and

_____ the prescribed membership admission fee of \$600.00 + 5% GST PLEASE NOTE that you will be billed separately for membership dues.

I have ordered

_____ CASB Record Confirmation. This must be ordered from CASB and sent to CPABC directly.

I undertake to make payment of annual membership fees within 60 days of being billed for the same.

I undertake that, if I am admitted as a member of the Chartered Professional Accountants of British Columbia, I will comply with the Chartered Professional Accountants Act, CPABC Bylaws, CPABC Bylaw Regulations, and Code of Professional Conduct from time to time in force.

**I authorize CPABC to include my name, employment information such as address, phone, fax and e-mail address in future Membership Directories.

Date _____, 20____ Original Signature _____

Present Employer

Name & Address _____

_____ Street _____ City/Town _____ Postal Code _____

Phone () _____ Fax _____ Direct line _____ e-mail _____

Home Address _____

_____ Street _____ City/Town _____ Postal Code _____

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