



APPLICATION FOR

Congratulatory Messages

FOR RESIDENTS OF BRITISH COLUMBIA

This Application for Congratulatory Messages for residents of British Columbia can be completed online at

<https://www.protocolapplications.gov.bc.ca/CMSForm>

Please submit your request at **least nine weeks in advance.**

Mail: Office of Protocol, PO Box 9422
Stn Prov Govt, Victoria, BC, V8W 9V1

Fax: 250-356-2814 **Tel:** 250-387-1616

Email: protocol@gov.bc.ca

The Congratulatory Messages Program is pleased to coordinate congratulatory messages for significant birthdays and wedding anniversaries on behalf of residents of British Columbia. While we are pleased to accept requests which arrive late, we cannot guarantee that the messages will be sent by the celebration date. Requests will be accepted 12 months in advance of the occasion date or no more than 12 months after occasion date. Requests for messages from The King will be accepted 6 months in advance of the occasion date or backdated up to 6 months. B.C. residents are eligible to receive messages from the officials listed on the second page.

REQUIRED INFORMATION

Please read carefully to ensure your request is processed.

- ▶ In the celebrant information section, please write the celebrant's name as you would like it to appear on the congratulatory message (prefix is mandatory for messages from the Governor General). Space is limited to **36 characters (including spaces)**.
- ▶ Celebrant's home address (this is required even if you would like the message sent to an alternate address).
- ▶ Delivery address is optional and if this section is blank, the message(s) will be mailed directly to celebrant.
- ▶ Requestor name, phone and email address. We may contact you to clarify message details.
- ▶ Complete the Declaration at the bottom of the application form.

Please continue to back of this form to complete your request ▶

The information on this form is collected under 26(c) of the Freedom of Information and Protection of Privacy Act. The information collected will be used to process congratulatory certificates and will be disseminated to the official(s) you have indicated on the second page. If you have any questions about the collection, use, or disclosure of this information, please contact a Protocol Manager at the Office of Protocol, 2nd Floor, 620 Superior Street, Victoria, BC, V8W 9V1 or at 250-387-1616;

Toll Free in Province: Enquiry BC 1-800-663-7867 and by fax at 250-356-2814.

Web site: www.gov.bc.ca/officeofprotocol

Application for Congratulatory Messages for residents of British Columbia

OCCASION

Anniversary Birthday Years/Age: _____

Occasion Date: _____
 YYYY MM DD

Party or Reception Date: _____
 YYYY MM DD

Do you wish to receive Federal messages in **French**: Yes No

ELIGIBILITY AND SELECTION

Request messages by checking the appropriate boxes:

Request message from:	Birthday	Anniversary
<input type="checkbox"/> His Majesty King Charles III	100 +	60 +, Interval: 5 years; every year after 70
<input type="checkbox"/> Governor General of Canada	90 +, Interval: 5 years; every year after 100	50 +, Interval: 5 years; every year after 70
<input type="checkbox"/> Prime Minister of Canada	75 +, Interval: 5 years; every year after 100	25 +, Interval: 5 years
<input type="checkbox"/> Lieutenant Governor of British Columbia	90 +	50 +
<input type="checkbox"/> Premier of British Columbia	75 +	25 +
<input type="checkbox"/> Leader of the Official Opposition of British Columbia	75 +	25 +
<input type="checkbox"/> Member of the Legislative Assembly (M.L.A.)	75 +	25 +

CELEBRANT INFORMATION

Please fill in the name(s) as they should appear on the message (maximum 36 characters including spaces):

1. _____ Female Male Non-binary

PREFIX FIRST NAME SURNAME

2. _____ Female Male Non-binary

PREFIX FIRST NAME SURNAME

HOME ADDRESS _____

PHONE _____

CITY _____

PROVINCE _____

POSTAL CODE _____

DELIVERY ADDRESS

Please deliver the message(s) to: Use Celebrant Address above OR C/O address below

PREFIX FIRST NAME SURNAME

DELIVERY ADDRESS _____

CITY _____

PROVINCE/STATE _____

POSTAL/ZIP CODE _____

PHONE _____

COUNTRY _____

REQUESTOR INFORMATION

FIRST NAME _____

SURNAME _____

PHONE _____

EMAIL _____

Declaration - I solemnly declare that all of the information provided in this application is true.

YYYY MM DD SIGNATURE

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