



Telephone: 1 877 526-1526 www.gov.bc.ca/societies

Mailing Address: PO Box 9431 Stn Prov Govt Victoria BC V8W 9V3

Courier Address: 200 - 940 Blanshard Street Victoria BC V8W 3E6

Submitted by: NAME

COMPANY

MAILING ADDRESS

CITY

PROV/STATE

POSTAL CODE/ZIP CODE

TELEPHONE

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the FOIPPA and the Societies Act for the purposes of assessment.

Once your name has been approved, enter the name reserved for the society and the name reservation number.

Item D and E Constitution and Bylaws Once Form 17 has been mailed, you are required to email copies of the following in an electronic format: the society's constitution. the society's bylaws (If you are adopting the Model Bylaws without amendments then a copy is not required).

Please provide the name reservation # (if applicable), approved society name and the words 'Continuation Application' in the subject line of the email. This will help us to match this form with your email.

Send the email to BCRegistries@gov.bc.ca

Definitions:

Extrajurisdictional non-share corporation means a corporation, without share capital, that is incorporated, amalgamated, continued or otherwise formed by or under the laws of a jurisdiction other than British Columbia. Home jurisdiction, in relation to an extrajurisdictional non-share corporation, means the jurisdiction in which the extrajurisdictional non-share corporation is incorporated, amalgamated, continued or otherwise formed. Electronic format means Microsoft Word or similar plain text document saved with one of the following file extensions: .doc, .docx,

Filing Fee: \$100.00

Please complete and mail this form to BC Registries and Online Services for filing with payment by cheque or money order made payable to the Minister of Finance, or provide the registry with authorization to debit the fee from your BC OnLine deposit Account. Please pay in Canadian dollars or in the equivalent US funds.

INSTRUCTIONS: Please review our webpage www.gov.bc/Societies for information on completing a Continuation Application.

Item A Name Reservation The first step in continuation is to ensure the name for the society is available. Go to www.bcregistrynames.gov.bc.ca.

A NAME RESERVED FOR SOCIETY NAME RESERVATION

B EXTRAJURISDICTIONAL NON-SHARE CORPORATION'S HOME JURISDICTION INFORMATION - (See definitions page 1.)

INCORPORATION OR IDENTIFYING NUMBER IN HOME JURISDICTION BUSINESS NUMBER (BN9) NAME IN HOME JURISDICTION HOME JURISDICTION DATE OF INCORPORATION OR FORMATION IN HOME JURISDICTION YYYY / MM / DD

IF THE EXTRAJURISDICTIONAL NON-SHARE CORPORATION IS REGISTERED IN BC ENTER ITS NAME AND REGISTRATION NUMBER NAME REGISTRATION NUMBER

C CONSTITUTION - PURPOSES OF THE SOCIETY

The constitution must be submitted by email in an electronic format to BCRegistries@gov.bc.ca.

Does the proposed society qualify and want to become a Member-Funded Society? Yes No

If yes, the following provision will be added to the society's constitution:

This society is a member funded society. It is funded primarily by its members to carry on activities for the benefit of its members. On its liquidation or dissolution,

D BYLAWS

Select one of the following options:

We have created our own bylaws and will submit by email in an electronic format to BCRegistries@gov.bc.ca

Adopt the Model Bylaws without change.

E REGISTERED OFFICE ADDRESSES

DELIVERY ADDRESS - (PO Box is not accepted, Postal code required.)	CITY	Prov.	POSTAL CODE
		BC	
MAILING ADDRESS	CITY	Prov.	POSTAL CODE
		BC	

PRIMARY EMAIL ADDRESS

ALTERNATE EMAIL ADDRESS

F DIRECTORS

- A society must have a minimum of three directors (individuals) and at least one must be ordinarily resident in BC.
- Member-funded society must have at least one director who is not required to reside in BC.
- Director addresses must be a physical address. Post office box alone is not accepted.
- Full names of directors are required, initials only are not accepted.

FIRST NAME	MIDDLE NAME	LAST NAME	
DELIVERY ADDRESS	CITY	PROV/STATE	COUNTRY
			POSTAL CODE/ZIP CODE

FIRST NAME	MIDDLE NAME	LAST NAME	
DELIVERY ADDRESS	CITY	PROV/STATE	COUNTRY
			POSTAL CODE/ZIP CODE

FIRST NAME	MIDDLE NAME	LAST NAME	
DELIVERY ADDRESS	CITY	PROV/STATE	COUNTRY
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DELIVERY ADDRESS	CITY	PROV/STATE	COUNTRY
			POSTAL CODE/ZIP CODE

FIRST NAME	MIDDLE NAME	LAST NAME	
DELIVERY ADDRESS	CITY	PROV/STATE	COUNTRY
			POSTAL CODE/ZIP CODE

G CERTIFICATION - *I certify that I have relevant knowledge of the society, and that I am authorized to make this filing.*

Note: It is an offence to make a false or misleading statement in respect of a material fact in a record submitted to the Corporate Registry for filing. See section 223 of the Societies Act.

NAME

SIGNATURE

DATE SIGNED (YYYY MM DD)

X

H DELIVERY METHOD - *Choose one delivery method for receipt of the society's certified documents.*

Society Email

Other Email
Address

Pickup (Victoria only)

Contact Person

Telephone

By Mail to Registered Office Mailing Address

By Mail to another address. Please specify.

MAILING ADDRESS

CITY

PROV/STATE

COUNTRY

POSTAL CODE/ZIP CODE