

Registration of a Sole Proprietorship or General Partnership

1		You are registering a:						
		☐ Sole Proprietorshi	•					
		☐ General Partnersh	•					
2	2.	Last Name:						
	First Name:							
		Fax:						
	Email:							
3		Do you have a Business Number with the Canada Revenue Agency (GST#)?						
		□ Yes:						
		□ No						
4		What is the legal status of your company?						
		□ Individual/Partnership						
		☐ Incorporation:						
			Corporate A	.ddress: _				
				_				
6	3 .	NR Number:	_					
7	7 .	NAICS Industry Code	_					
		Start Date of Busines						
ç).	. Residential Address:						
						-		
1	10. Business Address:							
		☐ Same as above						
						-		
11. Mailing Address:								
		☐ Same as resident						
		☐ Same as business	s address					
F	Partner (if applicable):							
		Last Name:						
		First Name:						
		Middle Name (optiona						
		Address:						
		d of Payment:						
□ Vi		☐ Mastercard	□ Ar	nex	☐ Cash	□ Debit		
Amo	un	t: \$115 + GST						
Ном	, va.	ould you like to rece	ive valir rea	istration	nanere?			
1104		Email	ive your reg	nsuauvi		person pick up		
	_	=				· · · · · · · · · · · · · · · · · · ·		