



RATEPAYER/COMMUNITY ASSOCIATION REGISTRATION APPLICATION

Name of Association _____

Statement of Purpose (or enclose a copy of constitution)

Boundaries of Area Represented:

I confirm that a general meeting was held on: _____

And was attended by (state number of attendees & list names on separate sheet provided): _____

when the following officers were elected:

EXECUTIVE OFFICERS:

PRESIDENT: _____ Telephone: _____

Address: _____

Email: _____

VICE-PRESIDENT: _____ Telephone: _____

Address: _____

Email: _____

SECRETARY: _____ Telephone: _____

Address: _____

Email: _____

TREASURER: _____ Telephone: _____

Address: _____

Email: _____

Date

Signature of Authorized Representative of Association

Note

- To be a recognized/eligible association, a minimum of 10 households is required.
- Please list only information which can be published.

Personal information contained on this form is collected pursuant to the Freedom of Information and Protection of Privacy Legislation and will be used for the purpose of compiling information which may be used by the general public upon request.