



Confirmation of Registration Request

1. APPLICANT INFORMATION

Full Legal Name: _____

License #: L _____

Phone: _____ Email: _____

2. JURISDICTION DETAILS

Provide the name and email address of the jurisdiction representative to which confirmation should be forwarded.

Jurisdiction: _____

Contact Name: _____

Contact Email: _____

3. SIGNATURE

Registrant Signature

Date

****By typing my name into the signature field, I agree that my electronic signature is the legally binding equivalent, and has the same meaning, as my handwritten signature. I will not, at any time in the future, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding.***

4. SUBMIT FORM

- Email the completed form to registration@aibc.ca.
- Once the form is processed you will receive an email with the invoice and payment instructions.
- The fees charged are in accordance with [Schedule B: Fees](#), found in the AIBC Bylaws.
- Once paid, your Confirmation of Registration will be emailed. Allow 1-3 business days for processing.

COLLECTION NOTICE

The information on this form is collected under the authority of AIBC Bylaws under the Professional Governance Act, S.B.C. 2018, c. 47. The information will be used to process your application and update the AIBC's records on the status of its applicants and Registrants. If you have questions about the collection and use of this information, please contact the AIBC's Registration & Licensing department by phone at 604.683.8588 or by email at registration@aibc.ca. As a public body under the provisions of the Freedom of Information and Protection of Privacy Act, the AIBC provides security and confidentiality of your personal information.