



Persian Immigration Consultants Association of Canada

## Membership Application form

(Please email your completed application along with a detailed CV/Resume to [info@picac.ca](mailto:info@picac.ca))

### Personal Detail:

First name:

Last name:

### Contact information:

Business Name:	<input type="text"/>
Address:	<input type="text"/>
Telephone No.:	<input type="text"/>
Cell Number:	<input type="text"/>
Fax Number:	<input type="text"/>
Email:	<input type="text"/>
Emergency contact Name & No.:	<input type="text"/>

### ICCRC Membership:

I am an authorized representative as defined in the Immigration and Refugee Protection Act (IRPA), and my membership No. is as follows:  
R \_\_\_\_\_

### Professional Membership:

- CAPIC  
 Canadian Law Society  
 Others, please specify: \_\_\_\_\_

### Declaration: (read carefully and check ALL that is applicable)

- I declare that I do not have any criminal record.  
 I agree that I will provide additional information and/or documents regarding this application as required and I undertake the responsibility to keep PICAC updated should any of the above information change.  
 I understand that PICAC membership is awarded by invitation only and final decision on the acceptance of this application will be determined the PICAC's Board of Directors.  
 I solemnly declare that the information I have given in the foregoing application is truthful, complete and correct, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

### Payment:

PICAC's membership subscription is on a yearly basis. Membership subscription starts on January 1 and ends on December 31. New members pay are pro-rated according to the month, the application is submitted. Membership fee payment and \$50.00, one time, administration fee is required at the time of application. Membership fees paid are non-refundable except when an application is refused by the membership committee.

If you are referred by a PICAC Member, please provide his/her name; otherwise, please explain how did you hear about PICAC;

Signature: \_\_\_\_\_

Date:

### Consent:

I acknowledge that I have voluntarily applied to become a member of PICAC and thus hereby agree to release PICAC, its directors, committees, members and guests from any responsibility or liability for any opinion or direction that maybe be provided at various events or through communication.