

MEMBERSHIP CANCELLATION REQUEST FORM

Pursuant to CPABC Bylaw 510, I hereby request that my membership in CPABC be cancelled.

Upon completion, please return this form to CPABC's Membership Registration Department (email members@bccpa.ca, fax (604 235 3316), or mail to the address noted above)

First Name	Middle Name	Last Name	Member ID #
Mailing Address			
City	Province	Postal Code	Country
			Telephone

Please indicate reason for cancellation:

CPD

Designation no longer required

Dues

No longer reside in BC / member of another body where I reside, please indicate: _____

Will not be immigrating to Canada

Cancelling in the face of discipline

Other. Please specify _____

In cancelling my CPABC membership, I acknowledge and understand the following:

- **As a non-member**, I must comply with the restrictions against use or display of professional accounting designations under section 45 of the *Chartered Professional Accountants Act*.
- **As a non-member**, I must comply with the restrictions on provision of services under section 47 of the *Chartered Professional Accountants Act*.
- **I will not be permitted to use the designation** "Certified Public Accountant" or the initials "CPA" in the province of British Columbia, even if I continue to hold that designation in a US jurisdiction.
- **I will not be permitted to be a member of any CPABC Committee**, or to attend or participate in any meetings of CPABC.
- **If currently employed in the province of British Columbia**, I have informed my employer, or will inform my employer promptly after acceptance by the CPABC of my membership cancellation, that I am no longer a member of CPABC.
- **If I obtain employment in public practice or carry on the practice of public accounting with a CPABC member**, I will ensure the firm or member is aware I am no longer a CPABC member (under Rule 410 of the Code of Professional conduct a firm or member must obtain prior consent of the Registrar to associate with said former member).

Please indicate status of membership certificate(s) (CPA and legacy):

I am required to promptly return to CPABC the certificate(s) of membership, issued to you by CPABC and its legacy bodies.

Membership certificate(s) (CPA and legacy) enclosed

Membership certificate(s) (CPA and legacy) already forwarded to CPABC

Membership certificate(s) (CPA and legacy) destroyed or location unknown

In the matter of my membership cancellation and certificate(s):

- **I acknowledge** that, pursuant to Bylaw 507(3), my membership certificates (CPA and legacy) are the property of CPABC;
- **I declare** that my membership certificates (CPA and legacy) have been destroyed or that their location is unknown to me;
- **I undertake** to forward my membership certificates (CPA and legacy) forthwith to CPABC if they are ever recovered.

Original (handwritten) signature

Date (mm / dd / yyyy)