

IMPORTANT: Please ensure that you are using the most current version of this form. To verify this please visit our website at www.WelcomeBC.ca/PNP

The information on this form is collected for the purpose of administering the British Columbia Provincial Nominee Program (BC PNP) as authorized by the *Canada/BC Immigration Agreement* and will be used to collect data for assessment of individual applications under the BC PNP. The information will be used for purposes of evaluating the Provincial Nominee Program. Personal information will be used and disclosed in accordance with the privacy protection provisions of the *Freedom of Information and Protection of Privacy Act* (RSBC 1996, c. 165). If you have any questions about the collection, use and disclosure of this information, contact the BC PNP by telephone: (604) 775-2227, Fax: (604) 660-4092 or by e-mail: Bus.Imm@gov.bc.ca

Personal Information of Registrant
1. Contact Information

Family Name	Given Name	Date of Birth (dd/mm/yyyy)	Country of Citizenship
Gender	Can you communicate in English? Other Languages Spoken <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Residential Address

Street Name and Number (unit, street)	City / Town	Province / State	Country	Postal / Zip code
Telephone Number	Alternate Telephone Number	Email Address		

3. Contact in British Columbia (if applicable)

Name of Contact in B.C.	Telephone Number	Email Address
--------------------------------	-------------------------	----------------------

4. What is your personal net worth (CAD \$) = (total personal assets minus total debts)

under \$400,000
 \$400,000 - \$800,000
 Over \$800,000

Business Background of Registrant
5. Current / Previous Business Information

Business Name	Year Established	# of Employees	Annual Sales CAD\$:	Company Website
Type of Business				
Are you the owner of the above mentioned business? Yes <input type="checkbox"/> If Yes, % of Ownership: <input type="text"/> No <input type="checkbox"/> If No, Position in Company: <input type="text"/>				
In Canada, what type of business are you interested in?				

Date of Seminar

IMPORTANT: Please visit the BC PNP web site for available seminar dates. Registration for a specific date is only confirmed once you receive a confirmation e-mail. Completing this form does not guarantee availability for the specified date.	Date of Seminar Requested
---	----------------------------------

Registration Fee

A Registration Fee of \$125 is applicable for the attendee and their spouse or interpreter. This fee must be paid prior to confirmation of your registration in the requested seminar. By signing below I hereby authorize the Province of British Columbia to charge the applicable fees to the noted credit card account.

Cardholder Name	Date	Cardholder Signature
------------------------	-------------	-----------------------------

 VISA

m m / y y

 MasterCard Credit Card Number:

Expiry Date:

Send the completed registration forms to:

BC Provincial Nominee Program

800 - 360 West Georgia St

Vancouver, BC V6B 6B2 Canada

Phone: +1 604 775-2227 **Fax:** 604 660-4092

E-mail: Bus.Imm@gov.bc.ca
Website: www.WelcomeBC.ca/PNP