



NOTICE OF ANNUAL MEMBERSHIP FEES April 1, 2011 to March 31, 2012

Check if you prefer mail comes to your
business address or home address.

Please make any corrections to your contact info below.
We require both business and home address to be completed.

Member Full Name:		
<input type="checkbox"/> BUSINESS	Firm or Employer	
	Address	
	City, Terr/Prov, Postal Code:	
	Telephone	
	Fax	
	EMAIL	
<input type="checkbox"/> HOME	Address	
	City, Terr/Prov, Postal Code	
	Telephone	
	EMAIL	

MEMBERSHIP FEES **Due and Payable April 1, 2011** **(ICANT/NU \$450, CICA \$460)**

<input type="checkbox"/> I am a resident or deemed resident of the NWT or Nunavut. (A deemed resident is defined as someone who is non-resident but earns income in the NWT or Nunavut.) I pay my CICA fees through the ICANT/NU.	\$450 + \$460 \$910
<input type="checkbox"/> I am a resident or deemed resident of the NWT or Nunavut. (A deemed resident is defined as someone who is non-resident but earns income in the NWT or Nunavut.) My CICA fee is paid through another provincial institute (pls specify): _____. (I pay ICANT/NU fees only)	\$ 450
<input type="checkbox"/> I meet ALL of the following conditions: (a) I reside in a Canadian province or territory other than the NWT or Nunavut; AND (b) I am a member of the provincial institute of Chartered Accountants in another province (please specify); _____ AND (c) I do <u>NOT</u> earn income in the NWT or Nunavut.	\$ 300
<input type="checkbox"/> I am exempt from payment of annual dues as I am retired AND have ceased to engage in regular daily gainful practice of public accounting AND I have: (a) attained the age of 60; or (b) completed 30 years of continuous membership in the ICA NT/NU	\$ NIL
<input type="checkbox"/> Late Fee, if fees paid after June 1, 2011	\$ 150
<input type="checkbox"/> New Member / Readmission Fee, if applicable	\$ 300

TOTAL APPLICABLE FEES FROM ABOVE	
ADD GST – 5% (Registration #122819394)	
NOTE - ALL members must pay GST regardless of employer, employment status or country of residence.	
TOTAL REMITTANCE	

**TURN OVER &
COMPLETE BOTH SIDES**

Make cheques payable to ICANT/NU.
 YES, I would like to receive a receipt by mail.



AREA OF EMPLOYMENT	
Public Practice: <input type="checkbox"/> Sole Practitioner <input type="checkbox"/> Partner <input type="checkbox"/> Other	<input type="checkbox"/> Industry <input type="checkbox"/> Government <input type="checkbox"/> Education <input type="checkbox"/> Other, pls specify:

REMISSION OF FEES	
(Only to be completed and signed if requesting remission or waiver of fees)	
<input type="checkbox"/>	Pursuant to By-law 2.26, I request remission of one half of my annual fees as I provide care on a substantially full-time basis to a child or children at least one of whom is six years of age or under at March 31 and my income from employment and self employment will not exceed \$6,100.00.
<input type="checkbox"/>	Pursuant to By-law 2.26(ii)(a), I request remission of my annual fees because of financial hardship. Documentation in support of this request is attached. The reduction or waiving of fees at the discretion of Council.
<input type="checkbox"/>	Pursuant to By-law 2.26(ii)(b), I request waiver of my annual fees because I am in full time attendance at a post secondary institution.
Signature	Date

These fees are authorized annually by the Council of the Institute of Chartered Accountants of the Northwest Territories and Nunavut (ICANT/NU) and the Board of Governors of the Canadian Institute of Chartered Accountants (CICA).

Fees must be received by the ICANT/NU not later than June 1, 2011. Late fee will apply after this date.

Please note that the annual practicing office fee is billed separately.