

“FIRST SCHEDULE

(Section 8 (2) & (5))

REGISTRATION FORM FOR NON-PROFIT ORGANISATIONS

Please note: Unincorporated non-profit organisations must attach to its completed form a copy of its Constitution or intended Constitution. It is IMPORTANT that you ACCURATELY complete and confirm all information provided before submitting this Form. The Registrar of Non-Profit Companies accepts no responsibility for the information provided in this Form.

Tick the appropriate box:

- New application Umbrella Organisation
- Renewal of registration
- Change of information
- Projected or annual turnover of \$75,000 or more: Yes No

Note: In the case of an application to change of information, ONLY the relevant sections must be completed.

Please attach a separate sheet of paper if additional space is required.

1. ORGANISATION CONTACT DETAILS

Name (or proposed name) of Non -profit Organisation (“NPO”):			
Contact details for NPO	Office Telephone:	Cell Phone:	Email:
	Address:		Website (if any):

2. CONTROLLER(S) CONTACT INFORMATION

Name:	Address:
Telephone (if different from above):	Position in NPO:
Email:	

3. ORGANISATION OPERATING DETAILS

a. In full detail, please describe the **PURPOSE** (or intended purpose) of the NPO:

b. Does your organisation have subsidiary organisation(s)? YES NO

c. If yes, please list the subsidiary organisation(s):

- 1. _____
- 2. _____
- 3. _____

d. Please provide the information below for the *President, Vice President, Secretary* and *Treasurer* of the non-profit organisation:

PRESIDENT	Name:	
	Telephone:	Email:
	Address:	
VICE PRESIDENT	Name:	
	Telephone:	Email:
	Address:	
SECRETARY	Name:	
	Telephone:	Email:
	Address:	
TREASURER	Name:	
	Telephone:	Email:
	Address:	

If an umbrella organisation, please attach a list of the full name and physical or street address of every constituent unit.

CONTROLLER DECLARATION

I, _____, controller of _____
(Name of Controller) (NPO Name)

certify that the information provided is true to the best of my knowledge.

Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

SECOND SCHEDULE

(Sections 20(1), 24(1) and 34(3))

DECLARATION FORM FOR NON-PROFIT ORGANISATIONS

Please note that this form must be filled out by the Controller of the non-profit or umbrella organisation.

I, _____ controller of _____ hereby declare that:

- (a) reliable financial records are being maintained and are available through the office administrator/registered agent/registered office or person who as the non-profit organisation's fiduciary, management body or other service provider is regulated by the Banks and Trust Companies Regulation Act (*Ch. 316*) or the Financial and Corporate Service Providers Act (*Ch. 369*); and
- (b) in respect of any donation that is one hundred thousand dollars and above, records are being maintained at the registered office address of the non-profit organisation, whether the donation is made as one lump sum or as aggregate sums.

Signature: _____

Date: _____