## Farm Registration & Farm Organizations Funding Act

## **Farm Registration Form 2019**

Office Use Only	Date	Farm Registration No.

Farm Business Name:				
Farm Location Civic Address and Community:				
Farm Operator or Corporate /Partnership Contact:				
Name:				
Civic Address & Postal Code:				
Phone Nu	umbers:			
E-mail:				
Farm Le	gal Status:			
	Individual Ownership	☐ Partnership	☐ Corporation	
	of Farm Partners able if the farm business is a partnership):			
General Farm Organization I wish to support (check one box only):				
	PEI Federation of	Gross Income Registration Fee HST Total Fee		
	Agriculture	□ 0 to \$ 99,999	$$150.00 + $22.50_{HST} = $172.50$	
			$00 $250.00 + $37.50_{HST} = $287.50$	
	FEDERATION OF AGRICULTURE	Greater than \$250,000 \$375.00 + \$56.25 $_{HST}$ = \$431.25		
		Gross Income	Registration Fee	
	National Farmers Union	□ 0 to \$ 99,999\$150.00		
	· ·	□ \$100,000 to \$250,000 \$250.00		
	n in	☐ Greater than \$250,000 \$375.00		
	'			
Payment Information Make cheque payable to:				
	e appropriate Organization box abo	1 0	1	
annual gross income from farming for the imtaxation year, check the appropriate fee box.				
	ompleted form and cheque to addre		c/o Carolyn Wood	
before <b>April 1, 2019</b> :  PO Box 2000			PO Box 2000	
Dagistrat	ion Fao Fralasad ¢		Charlottetown PE	
Registration Fee Enclosed \$  PAY online:		C1A 7N8 cjwood@gov.pe.ca		
www.princeedwardisland.ca/en/service/farm-regi		902-368-4145 or 1-866-734-3276		
stration-and-farm-organizations-funding				
Check this box only if you DO NOT CONSENT to the sharing your contact information with your supported farm organization. (Consent is required in accordance with the <i>Freedom of Information and Protection of Privacy Act.</i> )				
Refunds - If you wish a refund, you must contact the farm organization in writing by June 1, 2019.				
relates direc			tion and Farm Organizations Funding Act as it griculture and Fisheries may use the information	
_	e and Declaration declare that the information I have	provided is, to the best of	my knowledge, accurate and complete.	
Signature			Date	