



**PHYSIOTHERAPIST CORPORATION
ANNUAL RENEWAL 2009**

Consumer Services C-5
P.O. Box 2703
Whitehorse, YT, Y1A 2C6

* Fees are due on or before **January 31, 2009**.
Questions? Call the Licensing Officer at 667-5940

COMPANY INFORMATION	FEES & PAYMENT OPTIONS
Registration Number:	Permit renewal <input type="checkbox"/> \$ 100
Corporation Name	Permit renewed between <input type="checkbox"/> \$ 140 Feb. 1 and Mar. 31, 2009 or reinstated later
Address	Reinstatement fee if renewed after Mar. 31 <input type="checkbox"/> \$ 40
City Territory/Province Postal Code	Renewals post-marked after January 31, 2009 will be processed only if they include the correct fees.
Telephone Number	Charge my credit card (Visa, M/C, Amex) <input type="checkbox"/>
Email Address	Paying by cheque <input type="checkbox"/>
	Card # _____
	Expiry Date: _____

REMOVAL

Complete this section only if the physiotherapist corporation no longer wishes to be registered in Yukon.

This health profession corporation is no longer carrying on the practice of physiotherapy in Yukon and I request that the name be removed from the physiotherapist corporation register.

Date: _____ Signature: _____

RENEWAL REQUIREMENTS

In order to be registered,

- the health profession corporation needs to be in good standing with Corporate Affairs
- all voting shares of the corporation are legally and beneficially owned by physiotherapist registrants
- all non-voting shares of the corporation are legally and beneficially owned by persons who are either a physiotherapist registrant or a spouse, a child or otherwise a relative of a physiotherapist registrant
- all the directors of the corporation are physiotherapist registrants
- all the persons who will be providing physiotherapy services on behalf of the corporation are persons authorized by law to do so

ATTACHMENTS

In support of this renewal application, enclosed are:

1. Completed renewal form
2. Required Registration Fees
3. Proof of good standing with Corporate Affairs
4. Proof of good standing in each jurisdiction in which the corporation has provided physiotherapy services during the past year

DECLARATION

Answer each of the following statements by indicating "True" or False".

To the best of my knowledge the corporation's practice of physiotherapy is not under investigation in any jurisdiction outside Yukon. True False

The corporation is not the subject of disciplinary proceedings in any jurisdiction outside Yukon. True False

The corporation provided physiotherapy services in one or more other jurisdictions during the past year. True False

If so, which one(s)? _____

The ownership of all voting and non-voting shares of the corporation is in accordance with the *Health Professions Act*, Section 33(1). True False

All the directors of the corporation are physiotherapist registrants.

True

False

All the persons who will be providing physiotherapy services on behalf of the corporation are persons authorized by law to do so [*Health Professions Act*, Section 32(3)].

True

False

The information provided on this form is true, accurate and complete.

True

False

I authorize the payment by credit card as indicated on Page 1 of this form.

True

Not applicable

I have read and understand these declarations.

True

False

Date: _____ Signature: _____ Print Name & Title: _____

ADDITIONAL INFORMATION YOU WISH TO PROVIDE

FAILURE TO RENEW PERMIT

Section 36(3) of the *Physiotherapists Regulation* states that if a health profession corporation fails to apply for and pay the fee for the renewal of its permit before April 1, its permit is automatically cancelled and void by operation of law without notice to the corporation.

Carrying on the practice of physiotherapy in Yukon without a permit constitutes unprofessional conduct and will be prosecuted as an offence against the *Health Professions Act* and the *Physiotherapists Regulation* according to Section 40 of the *Act*.