



Membership Resignation Form

_____			_____
Full Name			Member Number

Address			
_____			_____
City	Province	Postal code	Telephone

Please complete and return this form to the attention of the Registrar at the Institute as soon as possible so that your request may be presented to the Membership Committee at its next meeting, and Council thereafter.

1. INTENT TO RESIGN

- I wish to resign
- membership certificate enclosed
- membership certificate already forwarded to the Institute
- membership certificate destroyed or location unknown (Part 2 below must be completed)

Please indicate in the space below the reason for your resignation request.

_____	_____
Signature	Date

PLEASE NOTE that if your membership certificate has been destroyed or its whereabouts are unknown you must sign the Acknowledgement, Declaration and Undertaking below.

2. ACKNOWLEDGEMENT, DECLARATION AND UNDERTAKING

In the Matter of my intent to resign my membership in The Institute of Chartered Accountants of the Yukon.

I Acknowledge that, pursuant to Bylaw Y303, my membership certificate is the property of the Institute;

I Declare that my membership certificate has been destroyed or that its location is unknown to me;

I Undertake to forward my membership certificate forthwith to The Institute of Chartered Accountants of the Yukon if it is ever recovered.

_____	_____
Signature	Date