



# College of Podiatric Surgeons of British Columbia

## FORM 4

### APPLICATION FOR REGISTRATION RENEWAL

### FULL AND NON-PRACTISING REGISTRANTS

For registration year January 1, 2019 – December 31, 2019

**IMPORTANT:** All required documentation must be received before your application will be processed

Please submit this form and all other required documentation and materials, with the annual registration fee for 2019. Information re additional required information is attached to this Form 4.

A fee invoice will be sent with this form to all current Full or NP registrants.

The 2019 fee for Full Registration is \$ 3200. Payment may be made in 2 installments.

The 2019 fee for Non-Practising Registration is \$ 200.

For office use only		
Pd	Full	Inst

1. **YOUR CPODSBC REGISTRATION NUMBER :**  (this is not your MSP billing no.)

2. **YOUR NAME/S (include any aliases or nicknames):**

Aliases/Nicknames: \_\_\_\_\_

3. **YOUR MAIL CONTACT INFORMATION FOR COLLEGE PURPOSES :**

4. **YOUR PRACTICE LOCATIONS (you must provide all locations; attach an additional sheet if necessary):**

