Farm Registration & Farm Organizations Funding Act

Farm Registration Form 2021

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 Numbers:

E-mail:

Farm Legal Status:

☐ Individual Ownership ☐ Partnership ☐ Corporation

Name(s) of Farm Partners
(only applicable if the farm business is a partnership):

General Farm Organization I wish to support (check one box only):

		Gross Income	Registration Fee
	PEI Federation of Agriculture	☐ 0 to $ 99,999	$150.00
		☐ $100,000 to $250,000	$250.00
		☐ Greater than $250,000	$375.00
	National Farmers Union	☐ 0 to $ 99,999	$150.00
		☐ $100,000 to $250,000	$250.00
		☐ Greater than $250,000	$375.00

Payment Information

Check the appropriate Organization box above. Depending on your annual gross income from farming for the immediate preceding taxation year, check the appropriate fee box. Pay online or submit completed form and cheque to address to the right before **April 1, 2021**:

Registration Fee Enclosed $ _____

PAY online:
www.princeedwardisland.ca/en/service/farm-registration-and-farm-organizations-funding

Make cheque payable to:
"Registrar of Farms"
Mail to
Registrar of Farms
c/o Carolyn Wood
PO Box 2000
Charlottetown PE
C1A 7N8
cjwood@gov.pe.ca
902-368-4145 or 1-866-734-3276

☐ 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 *Freedom of Information and Protection of Privacy Act.*)

Refunds - If you wish a refund, you must contact the farm organization in writing by **June 1, 2021.**

Personal information on this form is collected under Section 6 of the *Farm Registration and Farm Organizations Funding Act* as it relates directly to and is necessary for the registration of farms. The Department of Agriculture and Land may use the information to determine eligibility for its programming.

Signature and Declaration
I hereby declare that the information I have provided is, to the best of my knowledge, accurate and complete.

_____ Signature

_____ Date