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Getting Started

1. Once logged on click on "Corporation Profile" in navigation bar.



2. Review your information under the Corporate Snapshot tab. Once you have reviewed that information, click "Click Here to Proceed to the Corporation Renewal Page"

	Corporate Snapshot		
orporatio	n Registration R	enewal is now	open for 202
1.1			· · · · ·
			_
Click Here	to Proceed to the Corp	oration Renewal Page	
Form Su	hmiccionc		
Unit Ju	01112210112		
onn su	01113310113		
Form Name	01113510115	Submitted Date	
Form Name Corporation	Renewal	Submitted Date	View
Form Name Corporation Corporation	Renewal	Submitted Date 10/22/2019 10/24/2018	View View
Form Name Corporation Corporation	Renewal Renewal Renewal	Submitted Date 10/22/2019 10/24/2018 10/20/2017	View View View

 Please make sure to read what is required to complete your licensure renewal before clicking "Start Renewal Now"



Viewing previous submissions

If this is not your first year of renewal, last year's submission will be under 'Form Submissions'. You can press the 'View' button to review what was submitted last year which may help you answer the questions this year.

Declaration:

Only one voting shareholder is required to complete the Declaration. If there are numerous voting shareholders, you will need to work together to ensure that the person completing the application is the person who has been designated to do so.

Once the document is submitted and you have received a submission number, you will not be able to make any further changes. If you have made an error, please send an e-mail to cpssec_cop@cps.sk.ca with information on what your error was and a way for us to contact you by e-mail. Please write your submission reference number down or print the confirmation page for your records.

Renewal should be completed by Nov 1

The renewal submission deadline for corporations is November 1. If you have not completed your submission by that date, and if there are errors, there may not be time to fix them before the cut-off date of November 30th. If this is the case, the penalty of \$350 may be applied in addition to the \$150 corporate permit renewal fee.

You can leave the form at any time but must scroll to the bottom and click on the "Save and Continue" button so you can return later and proceed with the renewal

If you are ready to start the corporate renewal, press the "Start Renewal Now" button below



Note: If you are returning to complete your licensure renewal form click "Continue Renewal"



4. You will now be redirected to the secure license renewal form. You will need to hit "OK"



Note: If you do not see the above pop-up, please make sure pop-blocker is disabled

General Information Review

1. The renewal form will proceed in chronological order, starting with General Information



a. Review your Corporation Address, if you have no changes select "Yes" and click on "Save and Continue"

Corporation Address
Corporation Address Swift Current, SK
Is the address of the Corporation correct? *
Save and Continue

b. If you need to make changes to your address select "No". A modified section will open where you will need to make your changes to your address. When completed click on "Save and Continue"
 Is the address of the Corporation correct? *

Modified		
Address Line 1	Addı	ress Line 2
City	Province Saskatchewan	Postal Code

Voting Shareholder

2. Review your voting shareholder information. If there are no changes, click **"No"** to the first question. When page is completed click on **"Save and Continue"**

Corporation Name			
Corpo	oration		
Current Voting Shareholders			
Shareholder Name	Address	Number of Shares Held	Share Class
	SK	50	A
Does any person have the right to exerci shareholder? *	se voting rights other than listed above	Or, is there a change to the addre	ss of the Voting
 No 			
Does any corporation or trust hold voting	g shares? *		
⊖ Yes			
Previous Save and Contin	ue		6

a. If you need to make a change to the voting shareholder, click "**Yes**" to the first question. If you are changing a current voting shareholder you click "**Edit**" to make a change or "**Remove**" to remove the person as a voting shareholder. Please note that a corporation MUST have at least one voting shareholder.

Voting Shareholders	Non-Voting	Shareholders	Existing	Trust as a Shareholder		
ion as a Shareholder	Directors I	Practitioners	Insurance	e Other Corporate Info	rmation	Declaration
Corporat	tion					
olders						
А	ddress			Number of Shares Held		Share Class
	S	к	1	50		A
	Voting Shareholders Corpora olders	Voting Shareholders Non-Voting ion as a Shareholder Directors Corporation olders Address S	Voting Shareholders Non-Voting Shareholders ion as a Shareholder Directors Corporation	Voting Shareholders Non-Voting Shareholders Existing ion as a Shareholder Directors Practitioners Corporation Insurance	Voting Shareholders Non-Voting Shareholders Existing Trust as a Shareholder ion as a Shareholder Directors Practitioners Insurance Other Corporate Info Corporation Corporation SK	Voting Shareholders Non-Voting Shareholders Existing Trust as a Shareholder ion as a Shareholder Directors Practitioners Insurance Other Corporate Information Corporation Corporation SK Sumber of Shares Held

Does any person have the right to exercise voting rights other than listed above Or, is there a change to the address of the Voting shareholder? *

0	Yes
0	No

Modified						
Name	Address	Number of Shares	Share Class	Other Share Class		Remove
		1 •	Other	Н	Edit	Remove

i. If you need to make changes to an existing voting shareholder, click **"Edit"**. A new window will appear to make the necessary changes. When completed click **"Save & Return to Renewal"**. If you do not want to make changes click **"Cancel & Return to Renewal"**

lating Sharabaldara			
oung shareholders			
lame			
n			
Find			
Street *	City *	Province *	Postal Code *
		SK	×
lumber of Shares Held *	Share Class	•	
50	A	•	
ou did not intend to make any o	handes and wish to return to	the Corporation Renewal without s	aving select Cancel & Return to Renew
	langes and wish to return to	are corporation renewar warout si	aving, select cancer a return to renew
angel 9 Deturn to Denouvel			

 If you need to add a new voting shareholder, click on "Add New Voting Shareholder" under the modified section

Does any person have the right to exercise voting rights other than listed above Or, is there a change to the address of the Voting shareholder? *

YesNo				
Modified				
Name	Address	Number of Shares	Share Class	
		50	A	Edit
Add New Voting Shareholder				

i. The new voting shareholder screen will appear, click on **"Find"**, this will load the search to find the physician.

oting Shareholders			
Voting Shareholders			
Name			
Find			
Street *	City *	Province *	Postal Code *
		•	
Number of Shares Held *	Share Class *		
		-	

In the search, enter the first and last name or partial, and click "**Find**". Once the search displays the physician you want to add click on "**Select**".

Last Name Contains	sha	1
First Name Starts With	ka	
License No equals		
	Name	
Select	Dr.	
Select	Dr.	
	Dr	

This will populate the physician's information. Enter the number of shares and share class. When completed click on **"Save & Return to Renewal"**, if you do not want to make changes click **"Cancel & Return to Renewal"**

Voting Shareholders			
Name			
Dr.			
Find			
Street *	City *	Province *	Postal Code *
1	Saskatoon	SK 👻	£
	i i i i i i i i i i i i i i i i i i i		
Number of Shares Held *	Share Class *		
		-	
you did not intend to make any	changes and wish to return to the Co	orporation Renewal without saving, se	elect Cancel & Return to Renewal.
Cancel & Return to Renewal			
Save & Return to Renewal			

ii. You will now be redirected back to the Voting Shareholder tab. When complete click on "Save and Continue" to continue to the next section.

Non-Voting Shareholders

1. If you do not have any non-voting shareholders, you can answer the question "**No**" and click on "**Save and Continue**" to the next section



a. If you answer "Yes" you will be able to make any changes under the modified section as required.

Modify Existing Non-Voting Shareholders					
Name	Relationship	Number of Shares	Share Class		Remove
	Self	100		Edit	Remove

b. If you answer **"Yes"** you will be able to add a new non-voting shareholder, new sub-corporation non-voting shareholder and a new trust non-voting shareholder.

New Non-Voting Share Holder

3. Under the New Individual Non-Voting Shareholder section, click on **"Add New Individual Non-Voting Shareholder"**. A new window will open.



a. Enter the information for the new non-voting shareholder. Click on "**Find**" to bring up the search to the related member.

ndividual Non-Voting Sharel	nolders		
Individual			
Name *			
Address *			
City 1	Province *	Postal Code *	
	SК	×	
Member Related To *		Relationship to member *	
			-
Find			
Number of Shares Held *	Share Class *		
		-	

In the search, enter the first and last name or partial, and hit "**Find**". Once the search displays the physician you want to add, click on "**Select**".

Last Name Contains	sha 📑		
First Name Starts With	ka		
License No equals		3	
Ш	Name		
Select			
Select			

This will populate the "Member Related to" field. Select the relationship to the member from the drop down and enter number of shares and share class. When completed click on **"Save & Return to Renewal"**, if you do not want to make changes click **"Cancel & Return to Renewal"**

b. If there are no other additions or changes to be made you can click "Save and Continue"

Adding a New Sub-Corporation Non-Voting Shareholder

4. Under the New Sub-Corporation Non-Voting Shareholder section, click on **"Add New Sub-Corporation Non-Voting Shareholder"**. A new window will open.



a. Enter the name of the Sub-Corporation and click on **"Save to Add Shareholder"**, if you do not want to make changes click **"Cancel & Return to Renewal"**

ib-Corporation Non-Voting Shareholder
Sub-Corporation
Sub-Corporation Name *
ou did not intend to make any changes and wish to return to the Corporation Renewal Form without saving, select Cancel & Return to newal.
Cancel & Return to Renewal
Save to Add Shareholder
Shareholders Details
Click Save to Add Shareholder. You must add at least 1 Shareholder before saving and returning to the renewal.

Click on **"Add New Shareholder"**, a new window will appear. You will need to do this for everyone listed as a shareholder in the Sub-Corporation.

Shareholders Details			
You must add at least 1 Shareholder before saving and returning to the renewal.			
Add New Shareholder			

b. Enter the information for the Shareholder Details. Then click on "Find Member" to bring up the search for the related member.

Sub-Corporation Sha	reholders		
Shareholders Details			
Name *			
Street *	City *	Province *	Postal Code *
		SK	×
	1		
Member Related To "		Relationship "	
Find Member			
Share Type *	Number of Shares Held *	Share Class *	
O Voting			•
○ Non-Voting			

In the search, enter the first and last name or partial, and hit "**Find**". Once the search displays the physician you want to add click on "**Select**".

ıder		×
Last Name Contains	sha	
First Name Starts With	ka	
License No equals		2
Find		
ID	Name	
Select		
Select		
Select		

This will populate the "Member Related to". Select the relationship to the member from the drop down. Select the share type and enter number of shares and share class. When completed click on **"Save & Return to Sub-Corporation Information"**. If you do not want to make changes click **"Cancel & Return to Sub-Corporation Information"**.

If you did not intend to make any changes and wish to return to the Sub-Corporation Non-Voting Shareholder Form without saving, select Cancel & Return to Sub-Corporation Information.

Cancel & Return to Sub-Corporation Information

Save & Return to Sub-Corporation Information

c. Answer the question under the General Information. If you select **"No"** click on **"Save & Return to Renewal"**

d. If select **"Yes"**, you will be prompted for more information. Answer the question and then click on **"Find**" to bring up the search to the related member.

General Information	
Does any person or Corporation have any beneficial, equitable, or other interest in any shares of the Corporation other than as disclosed in the shareholder details section above? *	Please provide full information relating to the equitable or legal interest. *
Member related to *	Relationship to member *
Find	
Number of Shares Held * Share Class *	•

In the search, enter the first and last name or partial, and hit "**Find**". Once the search displays the physician you want to add click on "**Select**".

nder				
Last Name Co	ntains	sha		
First Name Sta	arts With	ka		
License No eq	uals			\searrow
Find				
	<u>ID</u>		Name	
Select	2			
Select				1
Select				

This will populate the "Member Related to". Select the relationship to the member from the drop down and enter number of shares and share class.

e. If there are no other changes to be made you can click "Save and Continue".

New Trust Non-Voting Shareholders

5. Under the New Trust Non-Voting Shareholders section, click on **"Add New Trust Non-Voting Shareholder".** A new window will open.

New Trust Non-Voting Shareholders
Add New Trust Non-Voting Shareholder

a. Enter the name of the Trust then click on "Find" to bring up the search to the related member.

Trust Non-Voting Shareholder		
Trust Information		
Trust Name *		
Member related to *		Relationship to Member *
		· · · · · ·
Find		
Number of Shares *	Share Class *	
		-

In the search, enter the first and last name or partial, and hit "**Find**". Once the search displays the physician you want to add click on "**Select**".

nder		×
Last Name Contains	sha 📑	
First Name Starts With	ka	
License No equals		
Find	Name	
Select	<u>rune</u>	
Select		
Select		

This will populate the Member Related to. Select the relationship to the member from the drop down and enter number of shares and share class.

b. Complete the Trustee Details section

Trustee Details		
Name of Trustee *		
Street *		
City *	Province *	Postal Code *
	SK 👻	

c. When completed click on **"Save to Add Beneficiary"**, if you do not want to make changes click **"Cancel & Return to Renewal"**

If you did not intend to make any changes and wish to return to the Corporation Renewal Form without saving, select Cancel & Return to Renewal.



d. Once the form is saved click on "Add New Beneficiary"



You will now be redirected to the Beneficiary Details page to complete. As above click on **"Find Member"** to search for the member related to and select the relationship from the drop down.

Beneficiary Details			
Name *			
Street *	City *	Province *	Postal Code *
		SK	×
Member Related To *		Relationship *	
Find Member			•

e. When completed click on **"Save & Return to Trust Information"**. If you do not want to make changes click **"Cancel & Return to Trust Information"**

If you did not intend to make any changes and wish to return to the Trust Non-Voting Shareholder Form without saving, select Cancel & Return to Trust Information.



f. You will be brought back to the Trust Non-Voting Shareholder page, to complete the Trust Details. Answer the question and upload a copy of your trust agreement. *This is necessary in order to process your renewal*



- g. If there are no other changes to be made you can click "Save & Return to Renewal"
- h. If there are no other changes to be made you can click "Save and Continue"

Existing Trust as a Shareholder

- 6. If you answer "No", you can click on "Save and Continue" to continue to the next section
 - a. If you answer "**Yes**", attach your new trust agreement and click on "**Save and Continue**" to proceed to the next section

General Information	Voting Shareholders	Existing Tr	Existing Trust as a Shareholder			
Existing Sub-Corporat	tion as a Shareholder	Directors	Practitioners	Insurance	Other Corporate Information	Declaration
orporation Name						
	Corporat	ion				
aswer the following of ave there been chang orporation was regist Yes	question as a "No" if the ges to the terms of the tered with the College	here is no T trust or the of which th	rust as a Shareh e beneficiaries o e College has n	older in the l f any of the f ot been notifi	Professional Corporation. ollowing trusts since the Prof ied in writing? *	essional
nswer the following of ave there been chang orporation was regist Yes No Click browse to uploa	question as a "No" if th ges to the terms of the tered with the College ad a copy of the new 1	here is no T trust or the of which th rust agreen	rust as a Shareh e beneficiaries o le College has n nent *	older in the f f any of the f ot been notif	Professional Corporation. ollowing trusts since the Prof ied in writing?*	iessional
nswer the following (ave there been chan; orporation was regis: Yes No Click browse to uploa File Nan	question as a "No" if th ges to the terms of the tered with the College ad a copy of the new 1 me	here is no The of which the frust agreen	rust as a Shareh e beneficiaries o le College has n nent *	older in the l	Professional Corporation. Ollowing trusts since the Prof ied in writing?*	iessional Size

Existing Sub-Corporation as a Shareholder

- 7. If you answer "No", you can click on "Save and Continue" to continue to the next section
 - a. If you answer "Yes", attach your new sub-corporation details and click on "Save and Continue" to the next section

Corporation Renewal					
General Information Voting Shareholde	ers Non-Voti	ng Shareholders	Existing Tr	ust as a Shareholder	
Existing Sub-Corporation as a Shareholde	Directors	Practitioners	Insurance	Other Corporate Information	Declaration
Corporation Name					
Corpo	ration				
Answer the question as a "No" if there is	no Sub-Corpo	ration as a Share	holder in the	Professional Corporation.	
Have there been changes to the sharehol the College of which the College has not • Yes • No	ders of the foll been notified i	owing corporati n writing? *	ons since the	e Professional Corporation w	as registered with
Click browse to upload a copy of the ne	w sub-corpora	tion details			
File Name					Size
	?	Drop files to attact	h, or <u>browse</u>		
Previous Save and Continu	ie j				

Directors

8. Review your Directors information. If there are no changes click **"No"** to the first question. When page is completed click on **"Save and Continue**"

General Information	Voting Shareholders	Non-Votir	ng Shareholders	Existing Tr	rust as a Shareholder	
Existing Sub-Corporat	ion as a Shareholder	Directors	Practitioners	Insurance	Other Corporate Information	Declaration
orporation Name						
	Corporat	ion				
urrent Directors						
Name			Ad	Idress		
			-			
as there been any ch	anges to the Directors	informatio	n as listed 👫			
⊖ Yes			0			
⊖ No						
Previous	Save and Continue					

Directors

a. If you need to make a change to the Directors, click "Yes". If you are changing a current director you click "Edit" to make a change or "Remove" to remove the person as a director. The corporation MUST have one Director.

ime	Address	Remove
	Ed	Remove

i. If making changes to an existing director, click "Edit". A new window will appear to make the necessary changes. When completed click "Save & Return to Renewal". If you do not want to make changes click "Cancel & Return to Renewal"

ame *			
Find			
Street *	City *	Province *	Postal Code *
		Saskatchewan	×
ou did not intend to make a newal.	my changes and wish to return to	the Corporation Renewal Form witho	ut saving, select Cancel & Return to
ancel & Return to Renewa			

b. If you need to add a new Director, click on "Add New Director" under the modified section

Modified Directors			
Name	Address		Remove
Dr		Edit	Remove
Add New Director			

i. The new Directors screen will appear, click on **"Find"**, this will load the search to find the physician.

Directors			
Directors			
Name *			
Find			
Street *	City *	Province *	Postal Code *
		Saskatchewan 👻	
	//		

In the search, enter the first and last name or partial, and hit "**Find**". Once the search displays the physician you want to add click on "**Select**".

der		
Last Name Contains	sha	
First Name Starts With	ka	
License No equals		\searrow
Find		
<u>ID</u>	Name	
Select		
Select		
Select		

This will populate the physician's name. Enter the address information. When completed click on **"Save & Return to Renewal"**. If you do not want to make changes click **"Cancel & Return to Renewal"**

ime *			
r. Karen Shaw			
Find			
reet *	City *	Province *	Postal Code *
		Saskatchewan	×
ı did not intend to ma wal.	ke any changes and wish to retu	rn to the Corporation Renewal Form with	out saving, select Cancel & Return t
ncel & Return to Ren	ewal		

ii. You will now be redirected back to the Director tab. When complete click on **"Save and Continue"** to continue to the next section.

Practitioners

9. Review your Practitioners information. If there are no changes click **"No"** to the first question and answer remaining question. When page is completed click on **"Save and Continue"**.

General Information	Voting Shareholders	Non-Votin	g Shareholders	Existing Tr	ust as a Shareholder	
Existing Sub-Corporat	ion as a Shareholder	Directors	Practitioners	Insurance	Other Corporate Information	Declaration
Corporation Name						
	Corporat	ion				
Current Practitioners						
Name	Practic	e Location(s)			
Do any persons practit	ce medicine by, through	yh, or in the	name of the Pro	Liability Ins CMPA Other CMPA Polic	y Number	listed as votin
 Yes No Are all physicians who name of the Profession with The Medical Profe Yes No 	carry on practice by, nal Corporation regist ssion Act, 1981?*	through or i ered in acco	n the rdance			

a. If you need to make a change to the Practitioners, click "Yes". If you are changing current practitioners you click "Edit" to make a change or "Remove" to remove the person as a practitioner.

lame	Pi	ractice Location(s)	CMPA Policy Number		Remove
				Edit	Remove

i. If making changes to an existing practitioners, click "Edit". A new window will appear to make the necessary changes. When completed click "Save & Return to Renewal", if you do not want to make changes click "Cancel & Return to Renewal"

Practitioners	
Practitioners	
Name *	Practice Location(s) *
Liability Insurance Provider * CMPA Other	CMPA Policy Number *
If you did not intend to make any changes and wish to return to the Co Renewal.	orporation Renewal Form without saving, select Cancel & Return to
Cancel & Return to Renewal	

b. If you need to add a new Practitioner, click on "Add New Practitioner" under the modified section

Name	Practice Location(s)	CMPA Policy Number	Remove
			Edit

i. The new Practitioners screen will appear. Click on **"Find"**. This will load the search to find the physician.

Practitioners	
Practitioners	
Name *	Practice Location(s) *
Find	li li
Liability Insurance Provider *	
⊖ CMPA	
○ Other	

In the search, enter the first and last name or partial, and hit "**Find**". Once the search displays the physician you want to add click on "**Select**".

der		
Last Name Contains	sha	
First Name Starts With	ka	
License No equals		\searrow
Find		
ID	Name	
Select		
Select		
Select		

This will populate the physicians name and CMPA Policy Number if we have it on file. If blank enter the CMPA Policy number and practice location information. When completed click on

"Save & Return to Renewal", if you do not want to make changes click "Cancel & Return to Renewal"

Practitioners		
Practitioners		
Name *		Practice Location(s) *
SHAW, KAREN		
Find		
Liability Insurance Provider *		CMPA Policy Number *
CMPA		
⊖ Other		
		₹
If you did not intend to make any char Renewal.	nges and wish to return to the Co	rporation Renewal Form without saving, select Cancel & Return to
Cancel & Return to Renewal		
Save & Return to Renewal		

 ii. If Liability Insurance Provider is other, please complete the required information. When completed click on "Save & Return to Renewal", if you do not want to make changes click "Cancel & Return to Renewal"

Liability Insurance Provide CMPA Other	ir *		
Name of Insurance Provider *	Address *	Policy Number *	Liability coverage per occurrence *
If you did not intend to make ar Renewal.	ny changes and wish to return	to the Corporation Renewal Form with	hout saving, select Cancel & Return to
Cancel & Return to Renewal Save & Return to Renewal			

iii. You will now be redirected back to the Practitioners tab. When complete click on "**Save and Continue**" to continue to the next section.

Insurance

10. Answer the question, and any follow up questions. When complete click on "**Save and Continue**" to continue to the next section.

General Information	Voting Shareholders	Non-Voti	ng Shareholders	Existing Tr	ust as a Shareholder		
Existing Sub-Corporat	ion as a Shareholder	Directors	Practitioners	Insurance	Other Corporate Info	rmation	Declaration
Corporation Name							
	Corporat	ion					
Does each physician v the name of the corpor the requirements of th	vho practices medicin ration hold liability ins e College bylaws? *	e by, throug surance that	h or in meets				
Yes							
⊖ No							
Previous	Save and Continue						

Other Corporate Information

11. Answer the question, and any follow up questions. When complete click on "**Save and Continue**" to continue to the next section.

General Information	Voting Shareholders	Non-Voti	ng Shareholders	Existing Tr	rust as a Shareholder	
Existing Sub-Corporat	tion as a Shareholder	Directors	Practitioners	Insurance	Other Corporate Information	n Declaration
Corporation Name						
	Corporat	ion				
Is the Professional Co the Business Corporat	rporation in good stan tion Act? *	ding pursu	ant to			
⊖ Yes						
⊖ No						
Do the articles of the F carrying on any busing practice of medicine b shareholder or as a per corporation?*	Professional Corporati ess or activities assoc y any physician listed erson practicing throug	on prevent iated with t as a voting gh the	it from he			
○ Yes ○ No						
Have the articles of the amended since the las filed with the College of	e Professional Corporation of the second strain of the second sec	ation been nual permit geons? *	was			
⊖ Yes						
⊖ No						
Previous	Save and Continue					

Declaration

12. Review the declaration and select the voting shareholder that completed the renewal from the drop-down

menu.	
-------	--

General Information	Voting Shareholders	Non-Voti	ng Shareholders	Existing Tr	ust as a Shareholder		
Existing Sub-Corporat	ion as a Shareholder	Directors	Practitioners	Insurance	Other Corporate Info	rmation	Declaration
Corporation Name							
	Corporat	ion					
Only one voting share shareholders. I agree and certify that:	holder is required to a	nswer this o	question on beh	alf of their co	prporation even if there	e are mi	Iltiple voting
1. Each Statement in thi	s application is true;						
2. I hold voting shares in	n the Professional Corpo	pration.					
3. I undertake that I will Medical Professional Ac Professional Corporatio renewal document shou	notify the College if I be t, 1981 relating to profe n fails to comply with an Id change.	come aware ssional incor y terms or c	that the Professi poration, or the b onditions containe	onal Corporat ylaws of the (ed in a permit	ion does not comply wit College relating to profe , or if any of the informa	th the pro ssional ir tion I hav	ovisions of The acorporation, or if th ve provided in this
I agree *							
Voting Shareholder *							

		•	
Previous	Save	Submit Renewal & Proceed to	Payment

a. If ready to proceed to payment click on "Submit Renewal & Proceed to Payment" to continue to the cart section.

b. If you want to review later and not proceed to payment yet click on "**Save**". Once the form saves, you will be able to close the window and come back later to complete.

Payment

13. You will be brought to the cart to review your fee's. Once reviewed click on "Proceed to Payment" Corporation Annual Renewal

Du	es Payments			
	ltem	Unit Price	Quantity	Amount
	Corporation Annual Fees	151.00	1	151.00

Subtotal 151.00

Proce	ed	Pav	ment

a. If paying by credit card enter your payment details and click "Submit Order"

ans			
em		Price	Total
orporation Annual Renewal		151.00	151.00
	Cart Charges		
	Item Total	1	51.00
	Shipping		0.00
	Handling		0.00
	Transaction Grand Total	1	51.00
	If you choose to pay by che	que or third party, please select p	ay later.
	Payment Details		
	Pay Now		
	Q		
	Pay Later		
	Payment amount	151.00	
	Payment method	Master Card	~
	Payment method	Master Card	~
	Payment method • Card number	Master Card	~
	Payment method • Card number • Name on card	Master Card	~
	Payment method • Card number • Name on card • Expiration date	Master Card	~
	Payment method Card number Name on card Expiration date 01	Master Card	
	Payment method Card number Name on card Expiration date 01 2020	Master Card	
	Payment method • Card number • Name on card • Expiration date 01 2020 • CSC	Master Card	
	Payment method • Card number • Name on card • Expiration date 01 2020 • CSC	Master Card	
	Payment method Card number Name on card Expiration date 01 2020 CCSC Card address	Master Card	

b. If paying by cheque click "Pay Later" then click "Submit Order"

em		Price	Total
orporation Annual Renewal		151.00	151.00
	Cart Charges		
	Item Total	151.00	
	Shipping	0.00	
	Handling	0.00	
	Transaction Grand Total	151.00	
	If you choose to pay by cheque or thin Payment Details	d party, please select pay later	
	If you choose to pay by cheque or thin Payment Details Pay Now	d party, please select pay late	
	If you chooses to pay by oheque or thin Payment Details Pay Now Pay Later	d party, please select pay late	

Note: If you are paying by cheque, please make the cheque out to *College of Physicians and Surgeons of Saskatchewan* and mailed to *101-2174 Airport Drive, Saskatoon, SK, Canada, S7L 6M6* at your earliest convenience to mitigate delays in processing or Re-Registration Fee being applied.

You will now be brought to the confirmation page, please print this page for future reference.