

FORM A

APPLICATION TO ORGANIZE A NEW BRANCH

To: The Minister of Agriculture, Aquaculture and Fisheries
Province of New Brunswick

We, the undersigned, hereby apply to be formed into a Women's Institute under the provisions of the Women's Institute Act. The proposed name of the Institute is The _____ Women's Institute.

The proposed Post Office address of the Institute is –

_____, County of _____,

N.B.

And each of the undersigned declares –

- (1) That she is over eighteen years of age.
- (2) That she is a resident of New Brunswick and of that Community to be served by the Institute.
- (3) That she has subscribed at least \$5.00 as her first annual subscription to the funds of the proposed Institute.

DATED at _____ this _____ day of _____ 200__

NAME

ADDRESS

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Name and Address of sender –

FORM B

CERTIFICATE OF INCORPORATION

This is to certify that application having been duly made for the formation of a branch Women’s Institute, with chief post office at and the said Institute having been declared by me to be organized, the, “..... Women’s Institute,” is a body corporate with the objects and powers attaching to such by virtue of “The women’s Institute Act.”

Minister of Agriculture, Aquaculture and Fisheries