

台美會計師協會 **Taiwanese American CPA Association** (For USA and Canada CPA)

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FAX: 604-270.4618

Mailing Address: #708-6081 No.3 Road, Richmond, BC, V6Y 2B2, Canada

New Membership Application Form for Y2021-2023

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| Your First and Last name | | | Chinese name: |
| Work for Company Name | | | |
| Company website | | | |
| Business Address: | | | |
| Office TEL: | | | Office Email: |
| Once approved membership, the above information will be shown on our website | | | |
| Cell phone #: | | Alternative Email: | |
| Your CPA License # | | Issuing State/Province | |
| Major practice area: | | | |
| Brief Schools & Work background or awards/talents | | | |
| Application Date: (mm/dd/yyyy) | | <i>Applicant signaure</i> | |
| Referral Valid member name: | | <i>#1 member Signature</i> | |
| Referral Valid member name: | | <i>#2 member Signature</i> | |

* you must hold a valid CPA license in USA or Canada.

* Please contact 2 valid members to cosign this form as reference, then email this form to info@tacpas.org

* Plase pay on line www.tacpas.org under "Registration and Payment" for US\$100.

area for cosign valid members' comment:

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