

Memorandum of Association

The name of the Society is:

(Society Name)

The objects of the society are:

(a) To

(b) To

(If space provided is not sufficient to record the Objects of the Society, please use attachment)

(c) To acquire by way of grant, gift, purchase, bequest, devise or otherwise, real and personal property and to use and apply such property to the realization of the objects of the Society;

(d) To buy, own, hold, lease, mortgage, sell and convey such real and personal property as may be necessary or desirable in the carrying out of the objects of the Society.

Provided that nothing herein contained shall permit the Society to carry on any trade, industry, or business and the Society shall be carried on without purpose of gain to any of the members and that any surplus or any accretions of the Society shall be used solely for the purposes of the Society and the promotion of its objects.

Provided, further, that if for any reason the operations of the Society are terminated or are wound up, or are dissolved and there remains, at that time, after satisfaction of all its debts and liabilities, any property whatsoever, the same shall be paid to some other charitable organization in Canada, having objects similar to those of the Society.

The activities of the Society are to be carried on in _____

(Location)

The Registered office of
the society is situated at:

(Street and Number)

(City or Town) _____
(Province) _____
(Postal Code)

We, the several persons whose names, addresses, and occupations are subscribed, desire to be formed into a Society, in pursuance
of this Memorandum of Association. Dated:

(YYYY-MM-DD)

Member: _____
(Name) _____
(Occupation) _____
(Signature)

Address: _____
(Street and Number)

(City or Town) _____
(Province) _____
(Postal Code)

Member: _____
(Name) _____
(Occupation) _____
(Signature)

Address: _____
(Street and Number)

(City or Town) _____
(Province) _____
(Postal Code)

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(Name) _____
(Occupation) _____
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Address: _____
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(Postal Code)

Member: _____
(Name) _____
(Occupation) _____
(Signature)

Address: _____
(Street and Number)

(City or Town) _____
(Province) _____
(Postal Code)

Member: _____
(Name) _____
(Occupation) _____
(Signature)

Address: _____
(Street and Number)

(City or Town) _____
(Province) _____
(Postal Code)

Witness to the Above Signatures:

Witness: _____
(Name) _____
(Occupation) _____
(Signature)

Address: _____
(Street and Number)

(City or Town) _____
(Province) _____
(Postal Code)