PFHCB
Professional Fish Harvesters Certification Board
NEWFOUNDLAND & LABRADOR

2023 NEW ENTRANT APPLICATION

Please print clearly

Name: _____ Social Insurance Number _____

Address: _____ Telephone Number _____

_____ Email Address _____

Postal Code _____ _____

Date of Birth _____ Gender _____
Day/Month/Year

IMPORTANT: As a condition of registration for next year (2023), all 2022 new entrants/apprentices must complete a Basic Safety Course (MED A1, MED A3 or equivalent). Information on courses will be sent to you at a later date.

To Be Completed by Owner/Operator/Skipper

New Entrants must be sponsored by a registered professional fish harvester who is an owner/operator/skipper. The owner/operator/skipper who sponsors a new entrant by signing this section is confirming that the new entrant will not displace a regular crewmember and will fish on his/her enterprise.

I _____ (sponsor) PFH #_____ am the owner/operator/skipper of a fishing enterprise and I agree to sponsor the above individual and verify the number of sea days the new entrant fishes.

Signature of Sponsor _____ **Date** _____

D E C L A R A T I O N O F C O N S E N T

In order for the Professional Fish Harvesters Certification Board to assess your professionalization status, it is necessary for the PFHCB to obtain information from Government Departments and Marine Institute of Memorial University. **The Declaration of Consent must be completed in order to process your file. PLEASE PRINT YOUR NAME AND SIGN AND DATE BELOW.**

I, _____, hereby authorize the Department of Fisheries and Oceans, Service Canada, Canada Revenue
(Please Print Your Name)
Agency, Marine Institute of Memorial University and Transport Canada to release any information required to assess my professionalization status to the Newfoundland and Labrador Professional Fish Harvesters Certification Board. This information can be released to the Professional Fish Harvesters Certification Board in future years as long as I am registered with the Board. In signing this consent, I authorize the release of:

- any relevant tax information from Canada Revenue Agency for all applicable taxation years;
- any relevant Department of Fisheries and Oceans licensing and Catch and Effort data;
- any other relevant information such as: name, address, telephone number, SIN, FIN; and
- any fisheries related training information.

This information is to be used by the Newfoundland and Labrador Professional Fish Harvesters Certification Board solely for the purposes of the professionalization program. I also authorize the Newfoundland and Labrador Professional Fish Harvesters Certification Board to release information on my status under the professionalization and certification program to the Department of Fisheries and Oceans, Service Canada, Canada Revenue Agency, Marine Institute of Memorial University and Transport Canada.

In signing this Declaration of Consent, I understand that all information which is transferred to the Newfoundland and Labrador Professional Fish Harvesters Certification Board will continue to be regarded as confidential and cannot be released to any other government departments, agencies or other third parties without my approval. This information is to be used solely for the purposes of determining my status under the professionalization program.

Signature of Applicant _____ **Date** _____

Please ensure the sponsorship section is completed and the declaration of consent and the application are signed. The completed application must be returned with a cheque or money order in the amount of **$75.00** payable to PFHCB or complete the credit card section below. **Please note that VISA Debit is not accepted**

I declare that the information provided is true and accurate to the best of my knowledge.

Signature of Applicant _____ **Date** _____

Card Number _____ Expiry Date _____

(CCV2) 3 digits on back of card _____

Card Holder's Signature _____ Visa ☐ Mastercard ☐

Office Use Only: Paid _____ Receipt #_____

Cheq ☐ M/O ☐ D/P ☐ C/C ☐ Cash ☐ Rec. by _____ Date _____

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