



CERTIFICATE OF RESPONSIBILITY

I, the undersigned _____, _____
First and last names Profession

Address _____

Telephone _____

Date of birth _____ in _____

Solemnly affirms the following:

I am _____ permanent resident _____ canadian citizen

I shall assume all responsibility, financial and otherwise for :

Last name, name	Date of birth	Relationship
Currently residing at the following address: _____		
Telephone : _____		

Last name, name	Date of birth	Relationship
Currently residing at the following address: _____		
Telephone : _____		

Purpose of the trip: _____

For a period of : _____
Date

I do make this solemn affirmation, believing sincerely that it is true and knowing that it has the same effects as if taken in accordance with the Canada Evidence Act and its amendments.

Signature of the declarant

Solemnly declared before me in the City of Pincourt, this

Date

Commissioner of oaths