

Certification

The follow	ing o	certification mu	ıst be signed by each Physical Th	erapist that is listed as a voting	
shareholde	er.				
I/We certif	y tha	at:			
		Each statement in this application is true;			
		□ Each person signing this declaration has read and is familiar with the provisions of <i>The Professional Corporations Act</i> and the Bylaws of SCPT relating to professional incorporation and certifies that the proposed Professional Corporation complies with the requirements contained in the Act and Bylaws.			
		if she/he become and permitted corporations incorporations	ach person signing this declaration undertakes that he/she will notify SCPT she/he becomes aware that the Professional Corporation once registered and permitted does not comply with the provisions of <i>The Professional Corporations Act</i> or the Bylaws of SCPT relating to professional accorporation; or if the Professional Corporation fails to comply with any erms or conditions contained in a permit.		
lame			Signature	Date	