FORM 1
CERTIFICATE OF REPRESENTATIVE

(Sections 5(4) and 6(2) of the Representation Agreement Act)

This certificate is to be completed by each representative and alternate representative named in a representation agreement made under section 7 of the *Representation Agreement Act*.

The completed certificate(s) should be attached to the signed representation agreement.

Part 1 – Identification of representative

1. This certificate applies to the representation agreement made by:

Full legal name of the adult (first, middle, last)	Date the adult/witness signed (month, day, year)

2. I am named in the representation agreement as representative.

3. My contact information is as follows:

Full name of representative (first, middle, last)	
Full address (address, city, province, postal code, country)	
Phone number (including area code)	Date of birth (month, day, year)

Part 2 – Certifications made by representative

1. I certify that

(a) I am an adult,

(b) I do not provide, for compensation, personal care or health care services to the adult who made the representation agreement, or I do provide the services described in this paragraph, but I am a child, parent or spouse of the adult,

(c) I am not an employee of a facility in which the adult who made the representation agreement resides and through which he or she receives personal care or health care services, or I am an employee described in this paragraph, but I am a child, parent or spouse of the adult,

(d) I am not a witness to the representation agreement,

(e) I have read and understand, and agree to accept, the duties and responsibilities of a representative as set out in section 16 of the *Representation Agreement Act*, and,

(f) I have read and understand section 30 of the *Representation Agreement Act* and have no reason to make an objection as described in that section.

Signature of representative *	Date this certificate was signed (month, day, year)

**Do NOT sign or date this certificate before the adult has signed the representation agreement.*

FORM (continued)
CERTIFICATE OF ALTERNATE REPRESENTATIVE

(Sections 5(4) and 6(2) of the Representation Agreement Act)

This certificate is to be completed by each representative and alternate representative named in a representation agreement made under section 7 of the *Representation Agreement Act*.

The completed certificate(s) should be attached to the signed representation agreement.

Part 1 – Identification of alternate representative

1. This certificate applies to the representation agreement made by:

Full legal name of the adult (first, middle, last)	Date the adult/witness signed (month, day, year)

2. I am named in the representation agreement as alternate representative.

3. My contact information is as follows:

Full name of alternate representative (first, middle, last)	
Full address (address, city, province, postal code, country)	
Phone number (including area code)	Date of birth (month, day, year)

Part 2 – Certifications made by alternate representative

2. I certify that

(a) I am an adult,

(b) I do not provide, for compensation, personal care or health care services to the adult who made the representation agreement, or I do provide the services described in this paragraph, but I am a child, parent or spouse of the adult,

(c) I am not an employee of a facility in which the adult who made the representation agreement resides and through which he or she receives personal care or health care services, or I am an employee described in this paragraph, but I am a child, parent or spouse of the adult,

(d) I am not a witness to the representation agreement,

(e) I have read and understand, and agree to accept, the duties and responsibilities of a representative as set out in section 16 of the *Representation Agreement Act*, and,

(f) I have read and understand section 30 of the *Representation Agreement Act* and have no reason to make an objection as described in that section.

Signature of alternate representative*	Date this certificate was signed (month, day, year)

**Do NOT sign or date this certificate before the adult has signed the representation agreement.*