



## **BC Indigenous Cannabis Product – Participant and Product Registration Form**

The BC Indigenous Cannabis Product program (the “Program”) is a program established by the BCLDB to profile the products of BC Indigenous non-medical cannabis cultivators and processors. Cultivators and processors meeting the Program eligibility requirements may register their products in the Program by completing this form and submitting it to [cannabis.vendor@bcldb.com](mailto:cannabis.vendor@bcldb.com). By completing this form and submitting it to BCLDB, participants acknowledge and agree that they have read and understand the Program terms and conditions, and will abide by such terms and conditions throughout the duration of their participation in the Program: <https://www.bcldb cannabisupdates.com/BCICP>

### **Participant Information**

The information collected on this form will be used for the purposes of determining eligibility for the Program and will be managed by the BCLDB in accordance with the Freedom of Information and Protection of Privacy Act, and section 14 of the Cannabis Distribution Act. Any questions about the collection, use or disclosure of this information should be directed to [cannabis.vendor@bcldb.com](mailto:cannabis.vendor@bcldb.com)

### **Processor Information**

Before submitting this form, ensure that the Processor has entered into a Licensed Producer Supply Agreement for Non-Medical Cannabis with the BCLDB.

**Organization Name**

**Contact**

--	--

**Phone Number**

**Email Address**

--	--

**HC License Number**

**Site Location (Street, City, Province)**

--	--

Please answer the following questions:

- |            |           |                                                                                                           |
|------------|-----------|-----------------------------------------------------------------------------------------------------------|
| <b>Yes</b> | <b>No</b> | The Processor is at least 51% Indigenous owned as set out in the Program terms and conditions.            |
| <b>Yes</b> | <b>No</b> | The Processor has one or more cannabis processing facilities located in the province of British Columbia. |
| <b>Yes</b> | <b>No</b> | The products listed on this form are solely processed by the Processor at their BC facility(ies).         |

## Cultivator Information

**Organization Name**

**Contact**

--	--

**Phone Number**

**Email Address**

--	--

**HC License Number**

**Site Location (Street, City, Province)**

--	--

Please answer the following questions:

- |            |           |                                                                                                             |
|------------|-----------|-------------------------------------------------------------------------------------------------------------|
| <b>Yes</b> | <b>No</b> | The specified Cultivator is at least 51% Indigenous owned as set out in the Program terms and conditions.   |
| <b>Yes</b> | <b>No</b> | The Cultivator has one or more cannabis cultivation facilities located in the province of British Columbia. |
| <b>Yes</b> | <b>No</b> | The products listed on this form are solely cultivated by the Cultivator at their BC facility(ies).         |



**Processor:**

**By executing this Application and Product Registration Form I hereby declare that:**

1. I have reviewed, understand and agree to the Program terms and conditions, including the Program eligibility criteria (<https://www.bcldbcannabisupdates.com/BCICP>). I understand that the BCLDB may amend or change the Program terms and conditions at any time at its sole discretion, and that such amendment or change could impact the Processor's eligibility for the Program;
2. The Processor meets the Program Eligibility Criteria. I understand that the Processor's eligibility for the Program may be reviewed by the BCLDB at any time, and that the Processor may be required to submit documentation to establish Program eligibility;  
and
3. I have the authority to act on behalf of the Processor and that the information submitted on this form and any accompanying documentation is true, accurate and complete.

Name \_\_\_\_\_

Title/Position \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Cultivator:**

**By executing this Application and Product Registration Form I hereby declare that:**

1. I have reviewed, understand and agree to the Program terms and conditions, including the Program eligibility criteria (<https://www.bcldbcannabisupdates.com/BCICP>). I understand that the BCLDB may amend or change the Program terms and conditions at any time at its sole discretion, and that such amendment or change could impact the Cultivator's eligibility for the Program;
2. The Cultivator meets the Program Eligibility Criteria. I understand that the Cultivator's eligibility for the Program may be reviewed by the BCLDB at any time, and that the applicant cultivator may be required to submit documentation to establish Program eligibility;  
and
3. I have the authority to act on behalf of the Cultivator and that the information submitted on this form and any accompanying documentation is true, accurate and complete.

Name \_\_\_\_\_

Title/Position \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_