



# International Firm Subscription Application

Updated 02.28.2020

The reporting period for the information submitted should be for your firm's most recently completed fiscal year end.

**Please complete this form and email to [membership@thecaq.org](mailto:membership@thecaq.org)**

## GENERAL FIRM INFORMATION

1. Most Recently Completed Fiscal Year End (MM/DD/YYYY)
2. AICPA Firm Number (if available)
3. Firm Name
4. Firm Headquarters Mailing Address

Address Line 1

Address Line 2

City/Town/Locality

Country

Postal Code

5. Firm Headquarters Telephone (including country code)
6. Firm Website



INTERNATIONAL FIRM SUBSCRIPTION APPLICATION

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16. Contact Partner Mailing Address                      Same as Managing Partner Address

Address Line 1

Address Line 2

City/Town/Locality

Country

Postal Code

17. Contact Partner Telephone (including country code)

18. Contact Partner E-mail

**ADDITIONAL FIRM INFORMATION**

19. Please indicate the total number of CPAs as of your firm's most recently completed fiscal year end. CPAs

20. Is your firm registered with the PCAOB?                      Yes                      No

21. If your firm is registered with the PCAOB, please indicate the number of issuers for which the firm issued audit reports as reported on the PCAOB' Annual Report (Form 2). Issuers  
If none, please enter 0.

**CAQ COMMUNICATIONS**

22. Managing partners and contact partners will be added to the distribution list to receive CAQ email communications. Other staff may sign up at [http://caq.informz.net/CAQ/pages/CAQ\\_Subscribe\\_2019](http://caq.informz.net/CAQ/pages/CAQ_Subscribe_2019).

**CAQ INTERNATIONAL FIRM SUBSCRIPTION FEE**

23. Your firm agrees to pay an annual subscription fee as assessed by the CAQ. Fees are not subject to refund in whole or in part at any time including in the circumstance of: (a) a merger, consolidation, or other combination of two or more firms; or (b) resignation, termination, or dissolution if a firm has enjoyed a subscription for any part of the year for which the fee applies.

Firm Representative Name

Title

Date