Please complete this form electronically when possible. If your form is illegible it may be returned.

You can access our Guidance Notes on this form HERE.

CHARITIES ACT 2014
APPLICATION TO RE-REGISTER AS A CHARITY

This information is being collected to determine the suitability of registered charities and associated persons for continued registration under the Charities Act 2014. Questions about this Form or the collection of the information can be directed to the Registrar General at the address below, via email at charityinfo@gov.bm or via telephone at (441) 246-8949.

RETURN THIS FORM TO: The Registrar General
Government Administration Building
30 Parliament Street
Hamilton HM 12
Email: charityinfo@gov.bm

1. Name of Charity:

2. Phone Number:	**3. Email Address:**
4. Address of charity (street address):	**5. Mailing address (if different from street address):**
6. Registered Charity Number	**7. Current Registration Expiry Date (if applicable):**

8. Financial Year End:

9. If you are a registered company please provide your company registration number and details on your Shareholders/Members:

10. If the charity has a trading subsidiary or subsidiaries please list them below or indicate N/A (a trading subsidiary is a company owned and controlled by the charity to trade on its behalf):

11. If the charity has a trade name please provide it below or indicate N/A:

12. Please select only one primary charitable purpose that best describes your charity and (if applicable) only one secondary charitable purpose (follow the link HERE for guidance):

	Primary	Secondary		Primary	Secondary
• The prevention of relief of poverty	☐	☐	• The advancement of sport	☐	☐
• The advancement of education	☐	☐	• The advancement of the arts, culture, heritage or science	☐	☐
• The advancement of religion	☐	☐	• The advancement of animal welfare	☐	☐
• The advancement of health or the saving of lives	☐	☐	• The relief of those in need because of youth, age, ill-health, disability, financial hardship or other disadvantage	☐	☐
• The advancement of citizenship or community development	☐	☐	• The advancement of environmental protection or improvement	☐	☐
• The advancement of human rights, conflict resolution or reconciliation, or the promotion of religious or racial harmony or equality and diversity	☐	☐	• The promotion of the efficiency of the armed forces of the Crown or of the efficiency of the police, fire and rescue services or ambulance services	☐	☐
• The provision of recreational or similar facilities in the interests of social welfare	☐	☐	• Recreational and similar facilities	☐	☐

13. GENERAL OBLIGATIONS

a) Does the charity work with persons who are considered vulnerable because of their age, physical or mental ability, or ill health?	Select
b) If you answered YES to question a), are you in compliance with your Vulnerable Persons Policy, and have you provided a copy to the Registry General?	Select
c) Is your charity in compliance with the financial crime risk management obligations in respect of your charity arising under the Charities Act 2014 and the Charities Regulations 2014?	Select
d) During the past year, did the charity notify the Registrar General of any changes to its t**rustees, address, bye-laws, constitution, or other particulars** within 30 days? (Section 17 of the Charities Act 2014)	Select
e) Are the charity's financial statements for the year to which this Re-registration relates attached?	Select
f) have the financial statements been submitted within 6 months of the end of the charity's financial year end? (Section 37 of the Charities Act 2014)	Select
g) Have the financial statements been signed by the Treasurer and one other officer or trustee?	Select
h) If the financial statements have been audited have they been signed by the auditor?	Select
i) Has the charity paid the relevant annual fee to the Registrar General?	Select
j) Charities must re-confirm their bye-laws/constitution every 5 years if there have been no changes. If this applies, have you included a copy with your application?	Select

14. If your charity is not in compliance with any of the requirements of the Charities Act 2014 or the Charities Regulations 2014 stated above, please provide an explanation:

15. Please identify the primary objectives of your charity and its main beneficiaries:

16. Please identify the current fundraising activities, projects and programmes that the charity is engaged in:

17. Please state how the proceeds of any fundraising activities were used:

18. Please explain how the charity's objectives and aims are of benefit to the public.

19. LIST ALL TRUSTEES, DIRECTORS AND PRINCIPAL OFFICERS OF THE CHARITY (continue on next page if necessary)	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	
Official Title:	
Name:	

20. In the last 5 years, have any of the charity's trustees, directors, or principal officers, whether under the laws of Bermuda or any other jurisdiction:	
a) been charged or convicted of an offence (excluding traffic violations) under any criminal law or other law in force?	Select
b) been the subject of, or convicted in any regulator, civil, or other action or proceeding?	Select
c) been the subject of bankruptcy or receivership proceedings?	Select
d) been the subject of a court judgment or writ, or failed to satisfy a judgment or writ?	Select
e) had a business license or registration refused, suspended, or cancelled?	Select

21. If the answer is YES to any of the questions above, please provided details (attach a separate sheet if necessary):

We, being two trustees of the applicant charity, hereby certify that the particulars contained in this application for registration under the Charities Act 2014 are true and correct to the best of our knowledge and belief.

Signature _____ Date _____

Print Name _____

Position in Charity _____

Signature _____ Date _____

Print Name _____

Position in Charity _____

Updated 14 September 2026

22. LIST ALL TRUSTEES, DIRECTORS AND PRINCIPAL OFFICERS OF THE CHARITY (continue on next page if necessary):			
Official Title:			
Name:			
Street Address:			
Phone:	(C):	(H):	Email:
Official Title:			
Name:			
Street Address:			
Phone:	(C):	(H):	(Email:)
Official Title:			
Name:			
Street Address:			
Phone:	(C):	(H):	(Email:)
Official Title:			
Name:			
Street Address:			
Phone:	(C):	(H):	(Email:)
Official Title:			
Name:			
Street Address:			
Phone:	(C):	(H):	(Email:)
Official Title:			
Name:			
Street Address:			
Phone:	(C):	(H):	(Email:)
Official Title:			
Name:			
Street Address:			
Phone:	(C:	(H):	(Email):
Official Title:			
Name:			
Street Address:			
Phone:	(C):	(H):	(Email):
Official Title:			
Name:			
Street Address:			
Phone:	(C)	(H):	(Email):

Please note the information contained in section 22 will not form part of the public charity file and will be used only for internal regulatory purposes.