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SEC 1972 Potential persons who are to respond to the collection of information contained in this form are (6-02) not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

PROCESSED JUN 17 2003

THOMSON FINANCIAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

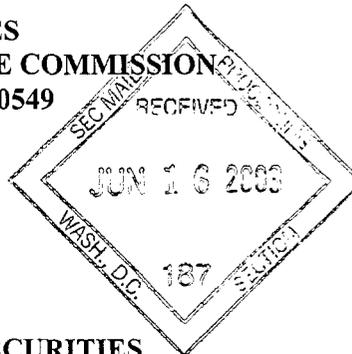


Table with OMB APPROVAL, OMB Number: 3235-0076, Expires: May 31, 2005, Estimated average burden hours per response... 1

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Table with SEC USE ONLY, Prefix, Serial, DATE RECEIVED

Name of Offering ([ ] check if this is an amendment and name has changed, and indicate change.)

Filing Under (Check box(es) that apply): [ ] Rule 504 [ ] Rule 505 [x] Rule 506 [ ] Section 4(6) [ ] ULOE

Type of Filing: [x] New Filing [ ] Amendment



03023408

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer ([ ] check if this is an amendment and name has changed, and indicate change.)

Intrepid Minerals Corporation

Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

Suite 1710, 155 University Avenue, Toronto, Ontario M5H 3B7 416-368-4525

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)

Brief Description of Business



- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner  
that Apply:

Full Name (Last name first, if individual)

Curtis, Laurence

Business or Residence Address (Number and Street, City, State, Zip Code)

40 Brentwood Road, Oakville, Ontario L6J 4B6

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner  
that Apply:

Full Name (Last name first, if individual)

Mosher, David

Business or Residence Address (Number and Street, City, State, Zip Code)

312 Beechfield Road, Oakville, Ontario L6J 5H7

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner  
that Apply:

Full Name (Last name first, if individual)

Kirkwood, Elizabeth

Business or Residence Address (Number and Street, City, State, Zip Code)

21 Nesbitt Drive, Toronto, Ontario M4W 2G2

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner  
that Apply:

Full Name (Last name first, if individual)

Winfield, Bruce

Business or Residence Address (Number and Street, City, State, Zip Code)

615 Inglewood Avenue W., Vancouver, B.C. V7T 1X4

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner  
that Apply:

Full Name (Last name first, if individual)

Davidson, David

Business or Residence Address (Number and Street, City, State, Zip Code)

236 Bessborough Drive, Toronto, Ontario M4G 3K3

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner that Apply:

Full Name (Last name first, if individual)

Wilson, Maria

Business or Residence Address (Number and Street, City, State, Zip Code)

2 Burnham Road, Toronto, Ontario M4G 1C1

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner that Apply:

Full Name (Last name first, if individual)

Poad, Steve

Business or Residence Address (Number and Street, City, State, Zip Code)

1224 Parsons Lane, Oakville, Ontario L6M 1H9

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner that Apply:

Full Name (Last name first, if individual)

Skerrett, Kathleen

Business or Residence Address (Number and Street, City, State, Zip Code)

Suite 1515, 390 Bay Street, Toronto, Ontario M5H 2Y2

Check Box(es)  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner that Apply:

Full Name (Last name first, if individual)

High River Gold Mines Ltd.

Business or Residence Address (Number and Street, City, State, Zip Code)

Suite 1700, 155 University Avenue, Toronto, Ontario M5H 3B7

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### B. INFORMATION ABOUT OFFERING

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?..... Yes No  
[ ] [  ]  
Answer also in Appendix, Column 2, if filing under ULOE.
2. What is the minimum investment that will be accepted from any individual?..... \$ 0.00 CDN
3. Does the offering permit joint ownership of a single unit?..... Yes No  
[ ] [  ]
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in

connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Name (Last name first, if individual)

Canaccord Capital Corporation

Business or Residence Address (Number and Street, City, State, Zip Code)

Suite 2200, 609 Granville Street, Vancouver, British Columbia, V7Y 1H2

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) .....  All States

[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) .....  All States

[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) .....  All States

[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

**C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS**

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt .....	\$ _____	\$ _____
Equity .Shares <u>700,000</u> .....	<u>\$420,000</u> CDN	<u>\$420,000</u> CDN
<input checked="" type="checkbox"/> Common <input type="checkbox"/> Preferred		
Convertible Securities (including warrants) .....	\$ _____	\$ _____
Partnership Interests .....	\$ _____	\$ _____
Other (Specify _____) .....	\$ _____	\$ _____
Total <u>700,000 common shares priced at CDN\$0.60 and 700,000 warrants to acquire common shares at CDN\$0.75 until May 28, 2004</u>	<u>\$420,000</u> CDN	<u>\$420,000</u> CDN

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors .....	<u>1</u>	<u>\$420,000</u> CDN
Non-accredited Investors .....	_____	\$ _____
Total (for filings under Rule 504 only) .....	<u>1</u>	<u>\$420,000</u> CDN

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505 .....	_____	\$ _____
<u>Regulation A</u> .....	_____	\$ _____
Rule 504 .....	_____	\$ _____
Total .....	_____	\$ _____

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees .....	[ ] \$ _____
Printing and Engraving Costs .....	[ ] \$ _____

Legal Fees ..... [ ] \$ 1,000 CDN  
 Accounting Fees ..... [ ] \$ \_\_\_\_\_  
 Engineering Fees ..... [ ] \$ \_\_\_\_\_  
 Sales Commissions (specify finders' fees  
 separately) ..... [ ] \$ 31,500 CDN  
 Other Expenses (identify) \_\_\_\_\_ [ ] \$ \_\_\_\_\_  
 Total ..... [ ] \$ 32,500 CDN

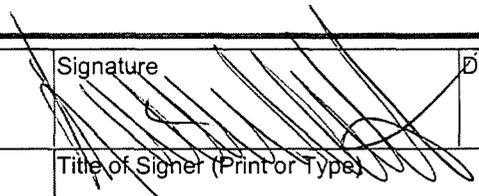
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." ..... \$ 387,500 CDN

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees .....	[ ] \$ _____	[ ] \$ _____
Purchase of real estate .....	[ ] \$ _____	[ ] \$ _____
Purchase, rental or leasing and installation of machinery and equipment .....	[ ] \$ _____	[ ] \$ _____
Construction or leasing of plant buildings and facilities.....	[ ] \$ _____	[ ] \$ _____
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) .....	[ ] \$ _____	[ ] \$ _____
Repayment of indebtedness .....	[ ] \$ _____	[ ] \$ _____
Working capital .....	[ ] \$ _____	[ ] \$ _____
Other (specify): <u>resource exploration</u> .....	[ ] \$ _____	[ ] \$ <u>387,500</u> CDN
_____	[ ] \$ _____	[ ] \$ _____
Column Totals .....	[ ] \$ _____	[ ] \$ <u>387,500</u> CDN
Total Payments Listed (column totals added) .....	[ ] \$ _____	[ ] \$ <u>387,500</u> CDN

**D. FEDERAL SIGNATURE**

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
INTREPID MINERALS CORPORATION		June 6, 2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
KATHLEEN E. SKERRETT	CORPORATE SECRETARY	

**ATTENTION**  
 Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)





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