

**THE UNIVERSITY OF CALGARY MEDICAL GROUP MEMBER AGREEMENT**

**APPENDIX II: Member Admission Application**

**TO: All Members of The University of Calgary Medical Group (the "Group")**

**RE: The University of Calgary Medical Group Fourth Amended and Restated member Agreement dated as of January 1, 2017 (the "Member Agreement") and Services Agreement (formerly the Agency Agreement) dated as of January 1, 2017 (the "Services Agreement")**

This Appendix II forms part of the Member Agreement. Terms defined in the Service Agreement and the Member Agreement shall apply herein.

I \_\_\_\_\_ for myself and my professional corporation, \_\_\_\_\_ hereby apply for membership as an/a \_\_\_\_\_ [Associate/Voting] Member. In making this application, I certify that I meet the qualifications of an/a [Associate/Voting] Member. [Not applicable if the undersigned is an existing Member.]

I agree to be bound by all of the terms and conditions of the Services Agreement and the Member Agreement, each as amended and restated from time to time, as if the same were set out in full herein. I acknowledge receipt of and having read and understood the Services Agreement and the Member Agreement.

I hereby nominate, constitute, and appoint the Senior Associate Dean as agent and attorney for and on my behalf to execute and deliver the Services Agreement and the Member Agreement, and all amendments thereto and restatements thereof.

I acknowledge and agree that the effective date of my admission as a Member shall be the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. [Not applicable if the undersigned is an existing Member.]

Executed and delivered this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

[Name of Professional Corporation]: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Per: [authorized officer]

Acceptance of this Application for admission as an/a [Associate/Voting] Member of the Group is hereby acknowledged this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Senior Associate Dean, for and on behalf of the Group