

SCHEDULE "B"

Associates Subscription Declaration

TO: All Group Physicians in the North Bay Physicians LEG  
(hereinafter referred to as the "Group")

IN CONSIDERATION of the Group agreeing to allow me to become a members of the Group, and other good and valuable consideration, the receipt of which is hereby acknowledged, I hereby declare and agree as follows:

- 1) I have been provided with a copy of the LEG governance date January 8, 2016 and the AFP dated April 1, 2009 (hereinafter referred to as the "Agreements"). I have read the Agreements, understand them and have had the opportunity to obtain independent legal advice with respect thereto.
- 2) I hereby agree to be bound by all terms of the Agreements as a party to the Agreements as if I have signed the Agreements as of the date below written. Without limiting the generality of the foregoing obligation, I also agree as follows:
  - a) I will fulfill all Physician' obligations
  - b) In the event that I breach any term of the Agreements, the Group shall have the rights set out therein to terminate my membership in the Group; and
  - c) If I decide to withdraw from the Group, I shall provide the Group with at least two months' notice. I understand that in such event, certain provisions of the Agreements continue to be binding upon me with respect to my ongoing liabilities.

IN WITNESS WHEREOF this Subscription Declaration has been executed by myself on

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Witness: \_\_\_\_\_  
Print name

Dr. \_\_\_\_\_  
Print surname

