

Authorization & Release For Health Care Practitioners

Marijuana Access Canada recommends to member physicians assisting patients in their application under the Marijuana Access Regulations that they ask patient-applicants to sign a release from liability.

The following form of release was developed and approved by The Canadian Medical Protective Association:

I _____ agree not to make any claim or complaint or commence any proceedings against Marijuana Access Canada, Medical Access Canada and the prescribing doctor who has signed the Medical Declaration in relation to the application process with one or more of the Licensed Marijuana Producers (LP) or my use of marijuana.

I release Marijuana Access Canada, Medical Access Canada and the prescribing doctor from any and all actions, causes of actions, claims, complaints and demands for damages, loss or injury whatsoever arising directly or indirectly as a consequence of my application with the LP or my use of marijuana. The release from liability is to be binding on my Heirs, Executors and Assigns. I, the applicant or authorized person hereby gives consent to the LP to disclose the necessary personal information and discuss the nature, volume and frequency of the applicant's purchases from LP to LP's service providers, and to the clinic staff and the health care practitioner(s) named in this form.

Name of Applicant*

Your Email*

Signature