

## **1105 COOPERATIVE, INC. MEMBER APPLICATION AND AGREEMENT SAN DIEGO COUNTY**

1105 COOPERATIVE, INC. (hereinafter 1105) is a California Consumer Cooperative Corporation organized under the laws of the State of California to establish an organization, in compliance with the August 25, 2008 California Attorney General's Guidelines, for the benefit of its members to facilitate and coordinate transactions between its members including:

1. The cultivation of medical marijuana for the exclusive use of its members;
2. The procurement of medical marijuana grown by its members for re-distribution to members;
3. The secure storage of medical marijuana for the benefit of its members;
4. To act as a designated primary caregiver for or to provide assistance to a member consistent with Health and Safety, Code 11362.5 et. seq. and 11362.7 et. seq. including specifically 11362.765; and
5. To act as a advocates for the safe access to medical marijuana and the rights of its members to legally administer and utilize medical marijuana consistent with the Compassionate Use Act and the Medical Marijuana Program of the State of California.

### **BY SIGNING THIS APPLICATION TO BECOME A MEMBER OF 1105 YOU UNCONDITIONALLY AGREE TO THE FOLLOWING TERMS AND CONDITIONS:**

1. You will give 1105 the right to verify your status as a qualified patient or primary care giver at any time. By submitting this application you represent that you possess fbn a valid state medical marijuana identification card or have a written recommendation from a California licensed physician, either and medical doctor or a doctor of osteopathy.
2. You agree not to distribute marijuana to any non-member of 1105.
3. You will keep your medical marijuana in a secure place, where it can not be consumed by children or other individuals who are not qualified patients and members of the 1105.
4. You agree not to use marijuana from 1105 for other than medical purposes.
5. You will provide updated information relative to your status as a qualified patient and your physicians renewal of your recommendation upon request by any staff member of the 1105.
6. You agree to allow 1105 to maintain a record of your status including a copy of your state identification card and or physician's recommendation and designation of a primary care giver and to verify when your recommendation and or identification card expires.
7. You will not administer medical marijuana obtained from 1105 before or while driving.
8. You agree to indemnify and hold harmless 1105, its staff, shareholders, officers, directors, attorneys, insurers from any and all losses, injury, damages, harm or liability associated with your use of medical marijuana or other health care modalities obtained from or engaged in at 1105, its facility or its staff.
9. If you are designating 1105 as an individual providing assistance to you as a qualified patient or a person with an identification card or your designated primary care giver under H & S 11362.765 you agree that 1105 is providing medical marijuana to you as a member of the 1105 because you are unable to cultivate and/or administer marijuana and therefore delegate to 1105 the right to cultivate, process and possess that quantity of medical marijuana allowed by the State of California and or any political sub-division on your behalf and agree to co-mingle your allowed amount with other 1105 members to enable 1105 to provide a reliable supply and quality that is consistent with your physician's recommendation and controlling state law for you and other members of 1105.

### **DISCLAIMER**

1105 ADVISES THAT INHALATION OF ANY COMBUSTED PRODUCT MAY HAVE ADVERSE HEALTH RISKS. THEREFORE YOU SHOULD DISCUSS WITH YOUR PHYSICIAN THE BEST METHOD OF ADMINISTERING YOUR MEDICAL MARIJUANA AND APPROPRIATE DOSAGE. WHILE 1105 WILL PROVIDE RECOMMENDATIONS RELATIVE TO THE TYPE THAT IS AVAILABLE AND ITS GENERAL EFFECT BETWEEN THE KNOWN PROPERTIES OF A SATIVA AND AN INDICA, YOU AND YOUR PHYSICIAN SHOULD DISCUSS WHICH IS MOST APPROPRIATE MEDICINE AND FOR WHAT TREATMENT.

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WARNING: Any violation of the agreed rules set out above may result in enforcement of conditions including suspension of membership privileges, revocation of membership privileges, a criminal report to appropriate law enforcement agencies.

I hereby agree to the terms and represent that I am a qualified patient, entitled to cultivate, process, possess, transport and utilize medical marijuana. I am applying for membership in the 1105 COOPERATIVE INC and hereby delegate to the Cooperative my rights to cultivate, process, possess such quantities are allowed under the laws of the State of California for my benefit and the benefit of its members. This delegation of rights can be taken back by the patient at any time either in whole or in part upon reasonable written notice to the Cooperative by the member. This notice can be either emailed, faxed, or delivered to the Cooperative distribution center.

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ California Zip Code \_\_\_\_\_

California Driver's License or ID Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone # \_\_\_\_\_

Doctor Recommendation Expiration Date \_\_\_\_\_

Email Address \_\_\_\_\_

I warrant and represent as follows:

I am a qualified patient protected by California Law Health and Safety code 11362.7 et. seq. and 11362.5 et. seq. My doctor has recommended in writing and approved my use of medical marijuana and will review my case on at least a yearly basis. I am legally entitled to use, possess, transport, and cultivate medical marijuana cooperatively through safe and affordable access pursuant to Health and Safety Code 11362.775, I agree to follow all rules and guidelines of the Cooperative and pay reasonable compensation and or contribute time services medicine in return for membership services and goods provided by the Cooperative.

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

\_\_\_\_\_  
Date

\*\*\*\*\*1105 Office Use Only\*\*\*\*\*

Copy of Doctor Recommendation \_\_\_\_\_

Copy of ID \_\_\_\_\_

Cooperative Staff Initials \_\_\_\_\_