

MEDICAL PRACTICE ACT, 1992

Appointment of a person to be responsible for the creation and retention of medical records by a corporation

(in accordance with Part 8 ss126-127)

NAME OF CORPORATION: _____

REGISTERED OFFICE: _____

ADDRESSES WHERE MEDICAL SERVICES ARE TO BE PROVIDED:

FULL NAME OF APPOINTED PRACTITIONER: _____

REGISTRATION NUMBER OF APPOINTED PRACTITIONER: _____

Consent of Appointed Practitioner

I, _____, hereby consent to my appointment to be
(appointed medical practitioner)

the responsible medical practitioner in relation to the creation and retention of all medical records by:

(name of corporation)

Signed

Dated