



TERMS AND AGREEMENT

Important, please read and sign below.

- The applicant is ordinarily a resident of Canada
- The applicant is seeking dried cannabis for only medicinal purposes
- The information provided by the applicant is complete and correct
- The applicant has sought out and been recommended by a physician of their choosing

The applicant acknowledges that medical cannabis is not yet approved for use as a drug in Canada. That its indications, safety and risks have not been adequately studied and the appropriate dosage is unclear. The applicant acknowledges and agrees that he or she is using any medical cannabis product obtained from Sky High Cannabis at his or her own risk and releases Sky High Cannabis from any and all actions, claims, complains, and demands for damages, loss or injury whatsoever arising directly or indirectly as a consequence of the use of medical cannabis obtained from Sky High Cannabis.

Name of Applicant:*

Applicant or Caregiver Signature:*

Date:*

(DD/ MM/ YYYY)

Email:*

*Items indicated with an * are required*