

SYDENHAM DISTRICT HOSPITAL
(the "SDH Corporation")

THREE YEAR MEMBERSHIP APPLICATION

**Applications will only be considered if received on or before midnight on April 30
with the application fee of \$10.00 at:**

- **the Secretary's office at P.O. Box 2030, 80 Grand Ave West, Chatham N7M 5L9; or**
- **the Wallaceburg Municipal Service Centre at 786 Dufferin Ave, Wallaceburg; or**
- **the SDH Corporation at 325 Margaret Ave, Wallaceburg.**

Cheques should be made payable to Sydenham District Hospital.

To: The Board of Directors

From: _____

Address: _____

City _____

Prov: Ontario

Postal Code _____

Telephone: (Home) _____

(Work) _____

E-mail _____

I, the undersigned, submit my application for admission as a member of the SDH Corporation for **three years**.

I understand that membership in the SDH Corporation shall be limited to persons interested in furthering the SDH Corporation's objects and purpose as described in the by-laws of the SDH Corporation (see attached). I understand that this application for admission as a Member will require the approval of the Board of Directors, by resolution.

I confirm that I meet the membership qualifications; namely, that, at the time of my application, I:

1. am not an employee of Chatham Kent Health Alliance or any of the hospitals that form the Chatham Kent Health Alliance (being, the SDH Corporation, The Public General Hospital Society of Chatham and St. Joseph's Health Services Association of Chatham, Incorporated);
2. am not a member of the Professional Staff of Chatham Kent Health Alliance or any of the hospitals that form the Chatham Kent Health Alliance (being, the SDH Corporation, The Public General Hospital Society of Chatham and St. Joseph's Health Services Association of Chatham, Incorporated); and
3. reside or work within the Municipality of Chatham-Kent, South Lambton County or Walpole Island.

I have enclosed my application fee of \$10.00 for a three year membership.

I understand that if my application is approved by a SDH Board of Director's resolution, I shall be a voting member of the SDH Corporation from the day of the annual general meeting which follows that payment until the day preceding the fourth successive annual general meeting.

If my application is approved by the SDH Board of Directors:

1. I will, at all times, support the objects of the SDH Corporation and abide by the SDH Corporation's By-Law.
2. My rights as a Member will be to:
 - a. elect Directors at the Annual or Special Meetings of the SDH Corporation;
 - b. receive the auditors' report, financial statements and management reports;
 - c. appoint auditors for the SDH Corporation pursuant to the By-Law;
 - d. confirm, reject or amend by-law amendments pursuant to the Corporations Act and the By-Law;
 - e. attend Members' meetings; a
 - f. request Special Meetings for specific agenda items, pursuant to the By-Law; and
 - g. seek nomination and stand for an elected position on the SDH Board.

Date _____

Signature of Applicant

OBJECTS AND PURPOSE OF THE SDH CORPORATION

Objects

The objects for which the SDH Corporation is incorporated are:

- (a) to operate a hospital and other community health agencies, where applicable;
- (b) to prevent disease and promote wellness in the Sydenham District;
- (c) to give care to the sick and injured; and
- (d) to promote medical research.

Purpose

The purpose of the SDH Corporation is also:

- (a) to provide the best possible service relative to quality, cost, timeliness, accessibility and comprehensiveness;
- (b) to co-ordinate services with the other community agencies;
- (c) to provide education and maintain high educational standards; and
- (d) to perform such lawful acts as are deemed necessary to promote the attainment of these objects.