

Cardiology Associates



MEMBERSHIP AGREEMENT

This Membership Agreement (this “**Agreement**”), between you and Cardiology Associates CCPHP, LLC (the “**Company**”), sets forth the terms and conditions of your Membership in the Company’s Concierge Membership Program. This Agreement includes the Membership Handbook (the “**Handbook**”), accessible at ccphp.net/cardiology-associates/member-handbook, which includes important information about your Membership, including the complete details of all the exciting services provided to you.

1. **The Company’s Role.** The Company works in collaboration with your chosen physician (“**Practitioner**”) and your Practitioner’s medical practice (“**Practice**”) to provide you with additional services and amenities listed in the Handbook (collectively, the “**Enhancements**”). These Enhancements are designed to amplify and elevate your healthcare experience and are in no way designed to replace or include the items or services covered by health insurance plans. Rather, your professional care is furnished and directed solely by your Physician who exercises his or her own medical judgement in the practice of medicine.

2. **You and Your Practitioner.** The Annual Fee specified below covers only the defined Enhancements as specified. The limited practice size enables your Physician to provide you this membership only experience. Your Practitioner will be your primary treating licensed healthcare provider. You and/or your insurer, as the case may be, will be financially responsible for paying for all healthcare and medical services received by you from your Physician and the Practice.

3. **Annual Membership Fee.** Your annual Membership Fee is \$ [REDACTED] for each year that you elect to participate and membership in the Company. All payments are due in advance of the period to be covered by the payment and can be made in annual, semi-annual, quarterly or monthly. Membership Fees are to be made to the Company by credit card or automatic debit from your selected bank account. The Membership Fee does not affect the co-payments, co-insurance or deductibles that you may be required to pay pursuant to the terms of your health insurance coverage. The Company reserves the right to change the Membership Fee, following at least thirty (30) days’ advance written notice.

4. **Term, Terminations and Renewals.** The initial term of this Agreement will be for one (1) year and begin on the date on which your Enhancements begin pursuant to this Agreement, as confirmed by the Company following its receipt of a copy of the signed Agreement and Membership Fee. The Agreement will automatically renew for successive one (1) year periods unless either party notifies the other party in writing of their desire not to renew this Agreement. Failure to pay the invoiced amount in a timely manner may result in a termination of this Agreement. Either party may also terminate this Agreement at any time for any reason upon thirty (30) days’ prior written notice to the other party.

**I HAVE READ AND UNDERSTAND THIS AGREEMENT, INCLUDING THE HANDBOOK
AND AGREE TO ALL THE TERMS**

Member Signature:	Cardiology Associates CCPHP, LLC
Printed Name:	By:
Date:	Its:

Effective Date: _____

[NOTE: This is either (a) the agreed-upon "go live" date for concierge services or (b) date of signature, if signing post "go live" date]

Member Information:

Name: _____

Date of Birth: _____

Address 1: _____

Address 2 (e.g., apt.): _____

City, State, Zip: _____

Phone: _____

Email: _____

Insurance Carrier: _____
(e.g., XYZ Ins/PPO)

Payment Information

Annual payment^{1*2} Semi-annual payment³ Quarterly payment⁴ Monthly payment⁵

<input type="checkbox"/> Bank Account (Bank Name):	<input type="checkbox"/> Credit Card:
Routing Number:	Name on Card:
Account Number:	Card Number:
	Security Code:
	Exp. Date:

¹

² Paid in full annually in advance, with no processing cost.

³ Paid semi-annually with a 2.5% processing cost applied to each payment. Semi-annual installments will be charged automatically to the credit card or bank account on file in advance of the 6-month period to be covered.

⁴ Paid quarterly with a 5% processing cost applied to each payment. Quarterly installments will be charged automatically to the credit card or bank account on file in advance of the 3-month period to be covered.

⁵ Paid monthly with a 7.5% processing cost applied to each payment. Monthly installments will be charged automatically to the credit card or bank account on file in advance of the month period to be covered.

