



# Membership Information/Agreement

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Full Name (First, M.I., Last) Panther ID

(\_\_\_\_\_) \_\_\_\_\_

Phone Number E-mail Address

G.P.A. \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Major Intended Profession

Preferred Method of Contact: (Text Message) / (Phone Call) / (E-Mail)

## MEMBERSHIP AGREEMENT

Being of sound mind and body, I, \_\_\_\_\_, attest to the fact that all information given in this CURE Membership Agreement is truthful and factual. I also understand that as a member I am responsible for a one-time fee of \$40.00, as a new member, followed by an annual \$35.00 renewal fee. If any of the information contained here is found not to be truthful or factual or the fee not paid, it is grounds for immediate revocation of my membership in Clinical Understudy and Research Education (CURE).

CURE, and its Executive Board, is not responsible, nor liable, for any incidents that may occur outside of our meetings. The lectures/seminars given in our general meetings are, by no means, a replacement for a course of treatment for any situation presented and in the case of emergency a licensed professional should always be contacted. Everything learned or taught during CURE general meetings are meant for educational purposes ONLY.

## FILMING & PHOTO CONSENT

I hereby consent to Clinical Understudy and Research Education (CURE):

- (a) To record my likeness and voice on a video, audio, photographic, digital, electronic, or any other medium, and to use my name in connection with these recordings; and
- (b) To use, reproduce, exhibit or distribute these recordings in whole or in part repeatedly for as long as these articles exist in any and all media, including but not limited to print publications, video tapes, non-theatrical DVDs, home video, CD-ROM, internet publications, etc.—this includes any electronic method/device/medium that may or may not have been developed presently but will be available and used in the future.

I hereby release CURE from and against any and all claims, demands, actions, causes of actions, suits, costs, expense, liabilities, and damages whatsoever that I may hereafter have from liability for any violation of any personal or proprietary right that I may have in connection with such use of my likeness, voice, or name in any medium. I understand and agree that all such recordings, in whatever medium, shall remain the property of CURE. I have read and fully understand the terms of this Agreement.

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Signature Date