

SCHEDULE A
JOINT HEALTH SCIENCE BENEFITS TRUST
EMPLOYER PARTICIPATION AGREEMENT

BETWEEN:

The Trustees of the Joint Health Science Benefits Trust
(the "Board")

AND:

(the "Employer")

1. The Employer acknowledges receipt of copies of the Agreement and Declaration of Trust for the Joint Health Science Benefits Trust (the "Trust Agreement") and the Joint Health Science Benefits Trust Plan (the "Plan").
2. Capitalized terms used in this Participation Agreement and not defined in this Participation Agreement have the meanings given to them in the Trust Agreement.
3. For clarity, in this Participation Agreement, "Parties" means, the Health Employers' Association of British Columbia and the Health Science Professionals Bargaining Association, collectively.
4. The Employer is required to participate in the Joint Health Science Benefits Trust (the "Trust") as a "Participating Employer."
5. By the Employer executing this Participation Agreement, it:

- 5.1 warrants and represents that it has full and sufficient authority to enter into this Participation Agreement;
- 5.2 agrees to provide to the Board such information and documentation reasonably required to verify the truth and accuracy of the foregoing warranty and representation;
- 5.3 further agrees to:
 - (a) pay and remit Contributions to the Trustees in accordance with the terms of the Trust Agreement and Plan;
 - (b) furnish the Board promptly with reports, payroll records, timesheets, accounting information and any other information as the Board may from time to time reasonably require;
 - (c) be bound by all the terms and provisions of the Trust Agreement and the Plan, as each is amended from time to time; and
 - (d) duly perform all of the obligations and duties, and accept all the liabilities, imposed upon Participating Employers by the Trust Agreement and the Plan; and
 - (e) that this Participation Agreement, when approved and accepted by the Board, will be binding on the Employer and the Employer's successors.

SIGNED, SEALED AND DELIVERED
in the presence of



The Employer

Per:

Name:

Title:

I/We have the authority to bind the
Employer

6. The Board hereby accepts the Employer's application to participate in the Trust, effective the date the employer became or becomes bound by the terms and conditions of the Collective Agreement.

SIGNED, SEALED AND DELIVERED
in the presence of



The Board

Per:

Name:

Title:

I/We have the authority to bind the Board