**BOARD OF RECORD REQUEST**

Please complete the following questions and email form to [info@hreba.ca](mailto:info@hreba.ca), we will prepare the Board of Record Agreement and send a copy for your signature:

|  |  |
| --- | --- |
| Name of the Principal Investigator undertaking study? |  |
| Primary Location (site) where study will take place? Include site address.  (i.e. University or Community Clinic, etc.) |  |
| What is the full legal name of site? |  |
| Will you (PI) be signing on behalf of the site? |  |
| Do you (PI) have the authority to bind the site to a contract? If yes, what is your title |  |
| If No, Name and Title of person signing on behalf of site? |  |
| Contact Name and email address, if we have any question on the above information. |  |

If you have any questions, please email [info@hreba.ca](mailto:info@hreba.ca) or call 403-210-5316