

Hi

It was nice meeting you today. Here are the forms you need in order to submit your application.

The following are needed in order to complete your application :

1. Please click on this website <https://medicalmarijuana.azdhs.gov/PatientApp.aspx>.
2. Fill out the qualifying new application and follow instructions.
3. The qualifying condition is on the certification form and check severe chronic pain.
4. Credit card info and email where you want the state to communicate with you.
5. Address where you want the card sent.
6. Check you do not need to cultivate.
7. Let me know if you have questions.
8. Follow up in 3 months (phone is ok, 15 mins)
9. Physician name is on the certification form as well.
10. Call 4802144970 or Email [drmusset@thehealingjoint.com](mailto:drmusset@thehealingjoint.com) with concerns/questions

Dr. Musset