CROC Alumni
Established 1999
Citizens Reunited to Overcome Cancer
Turning Tragedy into Triumph

CELEBRATE LIFE

1. Print PDF
2. Return Complete with Receipts
3. Mail to PO BOX 860,
   New Hampton, New York 10958

Patient Grant Application

Patient Name _____

Address & Phone Number: _____

_____

Person/Provider Recommending $ Help:

Address & Phone Number: _____

_____

Contact person/phone/e-mail: _____

(Nurse, Social Worker, Family Member) _____

Has the patient agreed that this information be shared with CROC? _____ Yes _____ No

Patient Signature _____ Date _____

Why do you feel that this patient is in need of some assistance? (Please note:) Due to prior confidentiality restrictions, please do NOT share personal information without prior approval by patient. (If necessary CROC is happy to consider a patient's eligibility based upon the recommendation of the medical provider.

_____

_____

_____

_____

How did you hear about us? _____

These restricted funds have been made possible through Celebrate Life Half Marathon in Rock Hill, NY

CROC - Citizens Reunited to Overcome Cancer
PO BOX 860, New Hampton, NY 10958 - Hot Lines (845) 291-8578

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* Please allow one month for a response to applicants *