

THE WOW FUND

OUR MISSION...to create, inspire, and sustain a community of breast cancer survivors who share in the empowering, therapeutic, and symbolic sport of dragon boating. We compete with heart and strength...work together with synergy, purpose, and laughter, collectively reach out to others & provide unconditional love and support and share a bond that reaches far beyond the cancer experience. We find that giving back to the community is an important part of our healing process.

This year we were fortunate to receive a grant from the Florida Breast Cancer Foundation to be used to support breast cancer patients who are currently undergoing treatment and have experienced financial hardship or reduced income as a result of their diagnosis. Our grants are small and we only have six to give. We have (3) \$500 grants to give to Seminole County residents and (3) \$500 grants for Orange County residents. The grants are to be used to pay a power bill, car payment, phone bill, or can be used towards rent. To qualify, your 2019 family income must not exceed 140% of the Area Median Income.

The Skinny on How to Get the Dough

(How to Apply for Funding)

1. You must be currently undergoing treatment and as a result you have experienced a reduction in income.
2. We will need a written note from your doctor (on their stationary) stating your diagnosis, when you began treatment, and when you will finish, if applicable.
3. A letter from your employer stating that your hours have been reduced or that you are on short-term leave.
4. Provide us with a copy of the bills you would like to pay. Note: If awarded the WOW Grant, we will require that you send us proof of payment.
5. Complete the WOW Fund Application
6. Submit the required documentation to:

Email to: warrionsonwater@yahoo.com

or

Mail to: P.O. Box 540132, Orlando, FL 32854



WELCOME ABOARD

Central Florida's Only Breast Cancer Survivor Dragon Boat Team

One more thing, we really want you to experience how beneficial dragon boating is. When you are feeling well enough, we encourage you to come out on the boat with us. If you are not yet ready at this point in your treatment, a seat in the boat will be waiting. We understand the journey, and believe that we have found something truly special and life changing. We look forward to sharing it with you.

Paddles UP!



WOW FUND GRANT APPLICATION

Funds are for those currently undergoing treatment such as chemotherapy, mastectomy, lumpectomy, or radiation. Those individuals undergoing reconstruction (6 months post cancer surgery), metastatic breast cancer, or those whose only treatment is taking an estrogen or aromatase inhibitor are not eligible to apply for this funding.

FIRST NAME _____ LAST NAME _____

CELL PHONE: _____ EMAIL: _____

MAILING ADDRESS: _____

COUNTY OF RESIDENCE: [] ORANGE [] SEMINOLE

DATE OF INITIAL DIAGNOSIS: (MM/DD/YYYY) _____

TYPE OF BREAST CANCER: STAGE _____

- LOBAL DUCTAL HER2 + ER/PR + TRIPLE NEG
 OTHER _____

ARE YOU CURRENTLY IN ACTIVE TREATMENT? YES NO

EMPLOYER

Company Name: _____

Contact Name: _____ Phone: _____

HOW HAS YOUR INCOME BEEN IMPACTED BECAUSE OF YOUR TREATMENT? PLEASE CHECK:

- WORKING LESS HOURS WAS TERMINATED
 NEEDED TO STOP DUE TO TREATMENT

IF NOT CURRENTLY WORKING (AND NOT ON SHORT -TERM DISABILITY OR EXTENDED LEAVE), DID YOU END EMPLOYMENT *BECAUSE OF YOUR DIAGNOSIS*? YES NO

DATE YOU ENDED EMPLOYMENT: (MM/DD/YYYY) _____

NAME OF ONCOLOGIST OR PRIMARY PHYSICIAN _____

By signing below, I represent that my answers are true and correct to the best of my knowledge, and that I am not fraudulently misrepresenting my current medical condition. I also understand that funds received from WOW are for payment of outstanding household bills such as; phone, utilities, rent or car payments and I will be required to submit paid receipts.

Print Name

Signature

Date