



Comfort Basket™ Application

Recipient's Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Birth Month _____

Cancer Diagnosis _____ In Treatment? Y N

Treatment Location _____

Grateful Friends has created Comfort Baskets™ brimming with supplies aimed at providing some comfort and a little bit of fun for patients receiving chemotherapy and/or radiation therapy.

One Comfort Basket™ per recipient per calendar year. Basket value is approximately \$125.

How Can We Help?

Recipients must be adults (18+) living with cancer or going through cancer treatment.

Please check all that apply

_____ **Male**

_____ **Female**

_____ **Other**

_____ **Chemotherapy**

_____ **Radiation**

_____ **Surgery**

How did you hear about us? _____

Referral's Name _____

Address _____

Phone _____ Email _____

Two Grateful Friends Inc. d/b/a Grateful Friends is a 501(c)(3) non-profit organization. **Tax ID # is 47-3976941.**

Mail application to:

Grateful Friends, P. O. Box 119, Beverly, MA 01915

OR FAX to: 978-854-5267

Please protect your information – do NOT email – our email is not encrypted. **Send ONLY via FAX or postal mail.**