



Application for Services

In partnership with a team of outstanding local wellness professionals, CWC provides free-of-charge integrative therapies to those facing cancer on Cape Cod and the Islands.

Who can apply

Cape Wellness Collaborative serves people on the Cape & Islands with a cancer diagnosis who are currently undergoing or recovering from cancer treatments such as radiation and/or chemotherapy. We also serve patients who are receiving cancer-related palliative care and people who have had positive genetic testing results for for inherited cancer risk and are undergoing prophylactic surgery such as mastectomy and or oophorectomy.

Please return your completed forms to:

Cape Wellness Collaborative
11 Potter Ave.
Hyannis, MA 02601

If you have any questions, please contact us at 774-408-8477.

Currently, we offer the following therapies / services:

Acupuncture
Art & Music Therapy
Chiropractic
Craniosacral
Therapy
Energy Work

Lymphatic
Massage
Meditation
Nutrition
Pilates
Reflexology

Reiki
Wellness Cares
Wellness Eats
Wellness Moves
Yoga
Routine Foot Care

APPLICATION STEPS

1

Fill out the application (you may also apply at capewellness.org or calling our office at 774-408-8477).

2

Our CWC client care representative will be in contact to answer any questions you may have.

3

Approved applicants will be mailed a Cape Wellness Card with an initial value of \$250, which can be used with any of CWC's participating practitioners.



If you have received services through CWC in the past and are looking to add more funds to your Wellness Card, you do not need to complete this application. Please call us at 774-408-8477 or email us (please be sure to include the best number at which to reach you), and someone from our client care team will be in touch with you as soon as possible.

First Name **Last Name**

Parent/Guardian Name (if under 18)

D.O.B. **Email**

Street address

City/Town **State** **Zip**

Cell phone **Home phone**

With what type of cancer have you been diagnosed?

- Breast
- Cervical
- Colorectal
- Lung
- Ovarian/Uterine
- Pancreatic
- Stomach
- Lymphoma/Leukemia
- Liver
- Other

When did you receive your diagnosis?



How did you hear about CWC?

- Friend
- Website / radio / social media
- Healthcare professional*

*If yes, who may we thank for referring you?

Where are you being treated?

- Beth Israel Deaconess Medical Center (BIDMC)
- Brigham and Women's Hospital (BWH)
- Cape Cod Healthcare (CCHC)
- Dana Farber Cancer Institute (DFCI)
- Massachusetts General Hospital (MGH)
- Other -----

Doctor/Oncologist name

I give Cape Wellness Collaborative permission to contact my oncologist or medical professional to confirm a recent past or present cancer diagnosis or a confirmed genetic predisposition.

Yes

Would your personal caregiver like our caregiver specialist to reach out to them?

- Yes No

Providing your caregiver's name and contact information will allow Cape Wellness Collaborative to reach out on your behalf with more information about our free caregiver support services. Learn more at capewellness.org/wellnesscares.

Caregiver name & contact info (email or phone)



Are you interested in receiving organic, nutritionally-crafted prepared meals?

Yes No

If yes, you may qualify for our Wellness Eats program. Learn more at capewellness.org/wellnesseats

As part of our Wellness Eats program, eligible clients can apply for our 12 meal program which provides delicious, organic, nutrient-dense, ready-to-eat meals, free of charge for both the person facing cancer and their caregiver. To be eligible for our Wellness Eats program, clients must meet the following criteria:

- Currently receiving active cancer treatment (i.e. chemotherapy and/or radiation treatment) and/or are less than 1 month post-surgery
- A resident of Cape Cod
- A Cape Wellness Collaborative recipient
- Have no known dietary allergies or food aversions

I have read the eligibility requirements to qualify for the Wellness Eats Program and by checking the box I attest that I meet the requirements.

Yes

Are you interested in yoga classes?

Yes No

If yes, you may be interested in our Wellness Moves program. Vouchers are available for clients to try some local yoga classes for a nominal fee of \$5 per class. Learn more at capewellness.org/wellnessmoves

Are you interested in receiving a chemo radiation bag?

Yes No

The mission of the Cape Wellness Collaborative is to provide complimentary/integrative therapies to people in our community facing cancer. We require all clients applying for services to consult with their primary oncologist before starting any and all therapies. If your application for services is accepted, we will provide you with a link to a list of vetted practitioners – and a system by which to pay them for any services you select. The mention of any product, service or therapy is not an endorsement by Cape Wellness Collaborative, nor is it intended to substitute for the medical expertise and advice of your primary health care provider and/or oncologist.



Cape Wellness Collaborative does not discriminate in its programs or activities on the basis of race, color, national or ethnic origin, ancestry, age, religion or religious creed, disability or handicap, sex or gender, gender identity and/or expression, sexual orientation, military or veteran status, genetic information, or any other characteristic protected under applicable federal, state or local law.

RELEASE AND AGREEMENT

The undersigned client requests the assistance of Cape Wellness Collaborative, Inc. (CWC) in identifying providers (hereinafter "Provider(s)") of services including, but not limited to, acupuncture, massage, meal services, nutritional counseling, Reiki, meditation and yoga (collectively "services"), so that such Providers can render services to the Client. I understand that CWC does not, in any way provide actual services.

Client hereby acknowledges and understands that CWC makes referrals only to Providers who are licensed and insured in their respective fields. Client acknowledges that they should consult with their medical professionals regarding the appropriateness of the requested services.

In consideration of Cape Wellness Collaborative identification of possible Providers:

- a) After consideration of the risks inherent in Providers services, Client fully assumes any and all risks associated with Clients' participation in any and all Provider services, and;
- b) Client further agrees to waive and release any and all claims that Client or their respective heirs, have, or may have in the future, against CWC, its agents, servants, directors, officers and employees for any losses, damages, expenses, or injuries, including death, suffered from, or in any way, in connection with Clients' participation in any and all Provider services.

Records of any identity, prognosis or treatment shall be privileged and confidential in accordance with the Massachusetts Privacy Act and the privacy rules of the Health Insurance Portability and Accountability Act (HIPAA).

I acknowledge reading, understanding and agreeing to the above provisions.

Yes

Signed by

Date

**The following page is available so you may
share a description of CWC services with your
medical team, if desired.**



Dear Medical Professional,

Your patient, _____, has applied for a monetary grant for integrative therapies through our non-profit organization, Cape Wellness Collaborative (capewellness.org).

The mission of the Cape Wellness Collaborative is to provide complimentary/integrative therapies to people in our community facing cancer. It is our hope to provide comfort, relieve stress and anxiety, and improve the overall quality of life of the people facing cancer on the Cape and Islands, while not interfering in any way with their current medical treatment(s).

Services we currently provide funding for include:

Acupuncture	Energy Work	Nutrition
Art & Music Therapy	Lymphatic Massage	Pilates
Chiropractic	Massage	Reflexology
Craniosacral Therapy	Meditation	Reiki
		Yoga

We have expanded our programs with three new initiatives – Wellness Moves, Wellness Eats, and Wellness Cares. These new initiatives have been years in the making, and we are thrilled to be rolling them out to provide additional support to people with cancer and their caregivers.

- Wellness Moves is an approachable, low cost way for people facing cancer to be able to exercise. CWC is partnering with local yoga studios to develop this program.
- Wellness Cares is about caring for the caregiver with meals and a wellness card.
- The Wellness Eats program provides 12 nutrient dense, healthy, delicious meals to both the client and their caregiver.

All of our partnering practitioners are licensed (when applicable), insured, and pre-screened by our Wellness Committee. If you have any questions or concerns, please do not hesitate to call Darlene at 774-408-8477 or email darlene@capewellness.org.