



# GRANT APPLICATION

PLEASE PRINT CLEARLY

My name is: \_\_\_\_\_ I live at: \_\_\_\_\_ DOB: \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone: \_\_\_\_\_  
\_\_\_\_I have health insurance. Ins. Co. Name: \_\_\_\_\_ ID# \_\_\_\_\_  
\_\_\_\_I do NOT have health insurance.

My Breast Cancer Surgery was on the LEFT / RIGHT / BILATERAL Year of Surgery \_\_\_\_\_  
My bra size prior to surgery was \_\_\_\_\_ My prosthesis size prior to surgery was \_\_\_\_\_  
In the past, I have received breast prostheses from: \_\_\_\_\_

I have been diagnosed with: Breast Cancer Asymmetrical Breasts Other

BFRIN has approval by me to receive private medical information from any medical professional involved in my care. This medical information would serve as proof of my diagnosis.

I am in need of a bra and/or breast prosthesis through BFRIN’s grant funding program. I am grateful for any donation that I might receive and understand that this application is in no way a guarantee of approval. If I am approved for this grant, I might not receive the particular style, color or brand name bra/prosthetics that I desire, but I am grateful for whatever is sent. I understand that the item(s) I receive are non-returnable and cannot be exchanged for different items. I have the choice to keep the item(s) or to re-gift them to another person **in need**. The bra and/or breast prosthesis that I receive from BFRIN will not be deducted from any items due to me from my insurance company. If my insurance company allows me to receive bras and/or breast prosthetics, I understand that I can go to another supplier to receive such. The item(s) received from BFRIN would be a gift to me. My statement is below describing in 100 words or less, my hardship and the reason why I should be chosen to receive a grant award.

X Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Your application will be reviewed to determine any assistance we can give.**

**We do not provide cash grants.**

**7176 Marshall Rd ~ Upper Darby, PA 19082 ~ 866-473-3325 ~ [www.bfrin.org](http://www.bfrin.org)**