



# Lowell Community Wellness

Inspiring and educating the Greater Lowell Community to attain a healthier lifestyle

## Pink Arrow Family Support Program

It is the purpose of the Pink Arrow Family Support program to provide a financial gift as a way of showing support to those who are experiencing cancer. This gift is not based on financial need; it is simply a sign of support from the Lowell Community. When the monies in this fund have been depleted, no further requests can be considered.

### Requirements and Policies

- The family lives in the Lowell Area School District and has a member of the household who is currently experiencing cancer.
- OR
- The individual who has cancer is an alum of Lowell Area Schools and has family currently living in the Lowell Area School District.
  - The family/individual is eligible for this gift once each calendar year as long as the cancer continues or continued expense results from the cancer experience.
  - A representative from Pink Arrow Family Support will contact the applicant via phone to determine the most appropriate distribution of available funds. All information is held in confidence.

### Application

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Name of person on the cancer journey

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Contact person

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Address City State Zip

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Phone number Alternative phone number Date of Application

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Signature of applicant (*by signing this application I agree to have a representative from Pink Arrow Family Support follow-up by phone*)

**Mail this application to:**  
*Lowell Community Wellness  
PO 246  
Lowell, Michigan 49331*