



Service Request Form

Important Confidentiality Notice: Please do not include any client-privileged, private, or highly sensitive information in this service request form (e.g., protected health information (PHI), financial data, or legal case details). This form is for general service inquiries only. Communications made through this form may not be secure or confidential, and submitting such information does not create a formal professional-client relationship or privilege until we have confirmed our ability and willingness to represent you or provide services through a formal agreement. If your request involves sensitive information, please contact us by telephone to arrange for a secure method of communication. By submitting this form, you acknowledge and agree to these terms. Our phone number is **705-746-5602**.

Basic Information

Relationship to the person submitting the form: (Agency/Organization, Family, Friend or Myself)

Please specify, the agency or organization below:

Email

Select programs:

<input type="checkbox"/> Access to socialization	<input type="checkbox"/> Nutrition
<input type="checkbox"/> Activity plan	<input type="checkbox"/> Meals on Wheels Hot
<input type="checkbox"/> Friendly Visiting	<input type="checkbox"/> Meals on Wheel Frozen
<input type="checkbox"/> Transportation	<input type="checkbox"/> Senior Exercise Classes
<input type="checkbox"/> Requires accessible transportation	<input type="checkbox"/> Home Help

Additional comments:

Does the person consent to this form? Date: _____

Yes No

Please fax to **705-746-5705** or send by mail to 60 James St. Parry Sound, Ontario P2A 1T5. Once we have received it, we will get back to you for the next steps. Thank you.