



Cameco Riders Touchdown for Dreams is a partnership between Cameco, the Saskatchewan Roughriders, the Cancer Foundation of Saskatchewan and the Saskatchewan Cancer Agency where together we are fulfilling the dreams of women in this province who have a life-threatening diagnosis of cancer.

**PATIENT INFORMATION:**

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day Month Year Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Name of oncologist: \_\_\_\_\_

Receiving treatment at:  Allan Blair Cancer Centre  Saskatoon Cancer Centre  
 Community Oncology Centre: \_\_\_\_\_

My dream is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The signature below certifies that the information contained in this form is accurate and represents the diagnosis and dream of the woman. It also provides consent for the Saskatchewan Cancer Agency to review the patient's medical file.

\_\_\_\_\_  
**PATIENT'S SIGNATURE**

\_\_\_\_\_  
Date

**APPLICANT INFORMATION: if same as above, please mark with an x here \_\_\_\_.**

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Relationship to the patient: \_\_\_\_\_

I consent that this application and its contents can be shared with partners of the Cameco Touchdown for Dreams Program.

\_\_\_\_\_  
**PATIENT'S SIGNATURE**

Please return applications by **mail** to the Cancer Foundation of Saskatchewan at 200-4545 Parliament Avenue, Regina SK S4W 0G3 or by **email** to [info@cancerfoundationsask.ca](mailto:info@cancerfoundationsask.ca). For more information call 639-625-2012 or toll free at 1-844-735-5590.

**Deadline for applications to be received by is February 28, 2020.**

