



**REFERRAL TO MEALS ON WHEELS
(Western or Chinese)**

Western: 604-732-7638 | wmow@carebc.ca

Chinese: 604-733-6615 | cmow@carebc.ca

Health & Home Care Society of BC • 204-3077 Granville Street, Vancouver, BC. V6H 3J9 • www.carebc.ca

Print and fax your completed form to 604-733-6698 or e-mail (see above)

Office Use Only: CIMS _____	Meals Created _____	Info Sent _____	Confirmed _____	Area _____
Confirmation & Consent to Service: Service Times _____ Cancellation _____ Service Minimum _____ Tray Recycling _____				

Requested start date: _____ (Allow a minimum of 2 business days for processing. We contact all potential clients before service begins and confirm the starting date at that time. The minimum trial amount is 5 meals.)

Last Name _____ First Name _____

Mr / Mrs / Miss / Ms Birthdate _____/_____/_____ Phone _____
Month Day Year

Apt # _____ Street Address _____ City _____ Postal Code _____

Special Delivery Instructions: (e.g. Slow to door; hard of hearing; buzzer code; other helpful info for volunteer) Pets: _____
 Kitchen: Fridge Freezer Stove Microwave

Emergency Contact #1: Name _____ Relation _____

Home Ph# _____ Work Ph# _____ Cell Ph# _____

Emergency Contact #2: Name _____ Relation _____

Home Ph# _____ Work Ph# _____ Cell Ph# _____

Case Manager/Other Contact(s) _____ Ph# _____

Family Doctor _____ Ph# _____

Living Arrangements: Alone Family Friend Spouse/Partner Other _____

Referred By _____ Relation _____ Ph# _____

Reason for Referral/Medical Concerns: _____

BILLING INFO:	Name _____	Relation _____	Ph# _____
Address: _____			Postal Code _____

Western Meal Options:

HOT MEALS (\$7.25 incl. soup and dessert) Mon Tues Wed Thurs Fri
(Choose one option; available for Hot Meals only) Regular Minced Non-Red Meat

FROZEN MEALS (\$6.25) Mon Tues Wed Thurs Fri

FROZEN BREAKFAST (\$5.75) Mon Tues Wed Thurs Fri

SANDWICH PACKS* (\$4.00 incl. fresh fruit) Mon Tues Wed Thurs Fri

**available only in addition to a western meal order*

Chinese Hot Meal: (\$7.50 incl. entrée, steamed rice and tonic soup; delivered by Chinese-speaking volunteers)

Mon Tues Wed Thurs Fri

Notes: _____

Routing:	Mon	Tues	Wed	Thurs	Fri
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