



HOWICK COMMUNITY MEDICAL CHARITABLE TRUST

GUIDELINES FOR THE COMPLETION OF AN APPLICATION FORM FOR FINANCIAL ASSISTANCE FOR MEDICAL CARE

PLEASE READ CAREFULLY BEFORE COMPLETING THE APPLICATION

1. Every application must be supported by a complete set of forms as set out on pages 1-10
2. Forms 1 and 2 will be completed by a medical practitioner on behalf of his or her patient.
3. Forms 3, 4, 5, 6, 7, will be completed by the applicant. Please note the following
 - a) A considerable amount of financial information is required. Applicants should not be discouraged from making an application because of these requirements
 - b) There are bound to be cases where applicant is unemployed and does not belong to a medical aid society (for example, a pensioner from Zimbabwe) but is living off capital invested external to Zimbabwe and the money is being brought into South Africa on a regular basis.
 - c) It is essential therefore that these forms be completed truthfully by the applicant
4. Form 8 and 10 will be completed by the medical sub-committee
5. Form 9 will form the final contract between the trust and the applicant.
6. Proof that the patient has attended an appointment at an approved Government Health facility (Greys, Edendale, Northdale) is essential for the application
7. The person applying for assistance must be a resident in the Umgeni Municipal area
8. The trust will offer the successful applicant either a fixed amount to cover in hospital treatment or the full in-hospital cost will be settled. The cost will include:
 - a) Accommodation in hospital
 - b) Prosthesis
 - c) In hospital blood tests and X-ray's
 - d) Professional fees

All pre and post hospital costs are for the applicants account

Please negotiate directly with the Doctor, Physio, lab and xray etc