



6220 S. Lindbergh Blvd., Suite 203

St. Louis, MO 63123

Phone: (314) 939-1550

[www.brsg.org](http://www.brsg.org)

-serving all of Missouri with premiere burn support, education and prevention

## Request for Financial Assistance

Name \_\_\_\_\_  
Last First Middle

Gender \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_ Race \_\_\_\_\_

Home Address \_\_\_\_\_  
Street and Number

\_\_\_\_\_ City State Zip Code

Home \_\_\_\_\_ Cell \_\_\_\_\_ E-mail \_\_\_\_\_

If patient is a minor, name of parent or guardian: \_\_\_\_\_

Have you applied for assistance from Burns Recovered before? Yes ( ) No ( )

If yes please briefly explain \_\_\_\_\_

What assistance is needed? Transportation ( ) Groceries ( ) Hotel stay ( ) Utilities ( ) Other ( ) Approx. cost? \_\_\_\_\_

Please explain your situation

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature Date

This application is your request for financial assistance. Please be advised that our grants are based on a needs assessment and availability of funds. We will make every effort to assist you, and in some cases will help you access other programs and services you may be entitled to, through collaborative partnerships and referrals to other patient care assistance agencies.

Patients must be receiving treatment at partnering hospital and demonstrate financial need. If you are requesting "Utilities assistance" you must include a copy of the bill you need assistance with. Utilities Assistance Grants are paid directly to service provider only.

Disclaimer: Acceptance is made on a case by case basis. Submitting an application does not guarantee approval. Please send application to Burns Recovered at 6220 S. Lindbergh Blvd., Suite 203, St. Louis, MO 63123

You may also fax to (314) 939-1555 or email at [brsg@brsg.org](mailto:brsg@brsg.org).