



LAO GARMENT FUND WAIVER FORM

The Lymphedema Association of Ontario has supplied garments that you; the recipient _____ (PRINT NAME) and your Doctor, Vendor and/or Therapist have recommended. _____ (PRINT SCRIPT DATE)

These garments will be delivered to you free of charge to the address supplied by you.

These garments cannot be returned, exchanged or re-distributed. If the garments are not suitable, please dispose of them.

To cut shipping costs, the garments will be shipped in an envelope without the box. The garments have been inspected to insure that they are not damaged.

These garments have been supplied to the LAO from various suppliers free of charge. We will do our utmost to supply you with the garments that best suits your needs.

Signature _____ Date _____

Name: _____