

# Transplant Assistance Program

## 2024 Application Form

Our Transplant Assistance Program provides support to CFCC members who have CF and who have had their workup for CF-related transplant done and are on the waitlist or have recently had a CF-related transplant. This grant aims to help relieve some of the financial stress while people recover and get back on their feet.

You may be eligible to receive support of up to \$500 to assist with your transplant-related costs. Please read the details on page 2 for the terms and conditions and how to apply.

Applications will close 1 December 2024 (or earlier if all grants have been distributed).

### Applicant details

Name of person with CF:		Transplant clinic:
Name of Parent / Guardian (if person with CF is a child)		
Email:		Phone:
Address:		
Suburb / Town:	State:	Postcode:

### Request details – complete all details below

<input type="checkbox"/> I confirm the transplant is CF-related	Date of final workup/transplant:
<input type="checkbox"/> Yes, you have my permission to confirm my transplant with the relevant hospital / CNC / Social Worker, OR <input type="checkbox"/> I am the transplant Clinical Coordinator / CNC / Social Worker	
Name of CF Clinical Coordinator / CNC / Social Worker:	Phone:
Signature of CF Clinical Coordinator / CNC / Social Worker:	
My bank account details for direct deposit / bank transfer:	
Name of Bank:	Account name:
BSB:	Account number

### Privacy and consent

I agree to the collection of the data on this form by CFCC and acknowledge that all personal information provided on this form will be placed on CFCC's database and used for purposes associated with its service and business operations / events. It will not be provided to any other person or organisation, without my prior consent, unless required by law. The CFCC Privacy Policy provides information on how to access your personal information held by CFCC and how to seek correction of such information if required. The Privacy Policy also contains information about how to make a complaint about any breach of privacy legislation. For further details, view CFCC's [Privacy Policy](#).

CFCC welcomes feedback. You can provide feedback about our programs, services and events by visiting [www.cfcc.org.au/page/125/contact-us](http://www.cfcc.org.au/page/125/contact-us)

## How to apply

1. Complete all sections of the Transplant Assistance Program application form.
2. Send the application form to the CFCC Support Team at:

Email: [support@cfcc.org.au](mailto:support@cfcc.org.au)

Post: NSW: 8 Parramatta Square, 49th Floor, Parramatta, Sydney 2150, Australia

VIC: 282 Neerim Rd, Carnegie VIC 3163

3. We will aim to contact you about your application within five business days of receiving it
  - Please call us on 1300 023 222 if your request is urgent.

## Terms and conditions

You must:

- Be a 2024 member of CFCC
- Have CF or be the primary parent / carer of a child aged under 18 years who has CF
- Have completed the transplant work-up process and now waiting on transplant or had a CF-related transplant in the previous 12 months

Grants are limited to one grant a year per person.

A completed application form must be provided, including relevant contact information for your Transplant Clinic OR your transplant CNC or Social Worker can complete and sign the relevant section.

Applications will close 1 December 2024 (or earlier if all grants have been distributed)

## Need more information?

If you have any questions or would like more information about the Transplant Assistance Program or any of CF Community Care's other services, contact us on:

Website: [www.cfcc.org.au](http://www.cfcc.org.au)

Email: [support@cfcc.org.au](mailto:support@cfcc.org.au)

Phone: 1300 023 222