



RAINY RIVER CANNABIS COLLECTIVE

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APPOINTMENT APPLICATION

PATIENT INFORMATION

PATIENT SURNAME

PATIENT FIRST NAME

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PHONE NUMBER

EMAIL ADDRESS

PATIENT ADDRESS

CITY

POSTAL CODE

ADDITIONAL INFORMATION

WHAT CONDITION ARE WE TREATING?

DO YOU NEED A DESIGNATED GROWER TO PRODUCE YOUR MEDICINE?

YES

NO

UNSURE

WE WILL ALSO NEED THE FOLLOWING:

- MEDICAL RECORDS REQUIRED FOR SERVICE
- GOVERNMENT ISSUED IDENTIFICATION
- VERIFICATION OF LOW INCOME
(Tax assessment, EI, Low-income subsidy or any applicable form)

EACH PATIENT WILL BE SCHEDULED ON A FIRST COME, FIRST SERVED BASIS.