



A Week Away Foundation Travel Statement

Thank you for providing the necessary medical information to support your patient for services through A Week Away Foundation. In order to keep the patient near their medical care team, all respites are planned to take place within 500 miles of the patient's home/hospital. Any trips that will exceed 150 miles from the family's home/hospital requires additional documentation from the patient's physician explaining that the patient is safe to travel that far.

Please read the statements below and check the statement that most accurately represents the patient's current medical status:

I certify that the patient named below is safe to travel to a respite that is further than 150 miles from their home/hospital.

I believe the patient's respite should be kept to a distance no further than 150 miles from their home/hospital.

Patient Name: _____ DOB: _____

Physician Signature: _____ Date: _____

Physician Name (Printed): _____