



The purpose of Waves of Hope is to cover the cost of the Lake Express tickets for patients and their families when they need to travel to distant medical facilities for treatment of the numerous diseases that people are faced with every day. Our goal is to take part of the financial stress off of the patient in hopes that they can instead focus their energy on improving their health and quality of life. We will do our best to accommodate every situation that we are encountered with and work to make the travel plans as convenient as possible for patients and their families.

It is our pleasure to be able to help people during this difficult time in their lives. Please feel free to contact us with any questions or concerns that you may have, we are here to help.

Thank-you,

Waves of Hope

Checklist for Waves of Hope

- *Application for Coverage of Lake Express Fare
- *Waiver of Liability for Patient and Passenger
- *Appointment Verification
- *Copy of Driver's License/ID for all passengers

Waves of Hope
www.WavesofHopeMI.com

1918 Lakeshore Drive
Muskegon, MI 49441
WavesofHopeMI@gmail.com

Fax: 231.755.2427
Phone: 866.914.1010

Our Inspiration

A relative of the Matuzeski family, Brad Foster fought for his life against Metastatic Melanoma for over 3.5 years. When there were no other options in West Michigan, Brad sought treatment at the Mayo Clinic. After those treatments failed, he was referred to an oncologist at Aurora Health/St. Luke's in Milwaukee conducting some clinical trials for Melanoma. St. Luke's, a phenomenal hospital, happened to be about 5 miles from where the Lake Express docks. The Lake Express cut down travel time and gave the gift of having valuable time with his wife and two young sons, safety, and the convenience and comfort of facilities while dealing with the horrible side effects from his cancer treatments. Every time Brad and his wife would return home from a treatment, their children and family would gather at the Muskegon Channel to welcome them home...good memories during a terrible time. During the treatment, the MMG (Muskegon Motorcycle Gang) held a fundraiser to offset the cost of the ferry. Brad passed away in December 2011, but it is too soon to say he "lost the fight to cancer," as he willingly subjected himself to so many research studies...he may still win that fight.





Waves of Hope Application

Patient Information: Name: _____ Address: _____ City/State/Zip: _____ DOB: _____ Signature: _____	Contact Information: Home Phone: _____ Cell Phone: _____ Email: _____	
Additional Passenger Info: Name: _____ Relationship to Patient: _____ Address: _____ City/State/Zip: _____ DOB: _____ Signature: _____	Contact Information: Home Phone: _____ Cell Phone: _____ Email: _____	
Appointment/Procedure Information Facility of appointment/procedure: _____ Date & time of first appointment/procedure: _____ Date & time of last appointment/procedure: _____ Brief summary of medical condition: 		
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Liability Waiver

Waves of Hope is not responsible for any alternative transportation if the Lake Express is not running for any reason such as weather or maintenance. All expenses for any other transportation will be covered by the individual(s) requiring the transportation. Waves of Hope will do their best to accommodate last minute changes, but some factors may be beyond our control such as the Lake Express already being at capacity. Waves of Hope is not responsible for any of the property, including a vehicle that the individual(s) brings with them on the Lake Express. You are riding the Lake Express at your own risk and Waves of Hope is not responsible for you or your belongings. If you are unable to keep your reservation on the Lake Express you must call the Lake Express to cancel your reservation as soon as possible. If you are a no show and fail to cancel your reservation, then you will be responsible for the cost of your trip on the Lake Express. This waiver will be valid for 1 year from the signing date.

This waiver must be signed by all passengers riding the Lake Express courtesy of Waves of Hope.

Passenger signature: _____ **Date:** _____

Passenger signature: _____ **Date:** _____

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