



Lions Club of Dania Beach **Share the Vision**

Lions Club of Dania Beach

Joann Brave, Committee Chair
501 SW 4th Ave
Dania Beach, FL 33004

Share the Vision Summary

Eyeglasses are purchased for those individuals that do not have insurance and/or are unable to purchase eyeglasses for themselves and have nowhere else to turn to for help. An application is submitted to the Sight Committee for review. If approved, the recipient/parent/guardian is sent a voucher to take to the club’s approved optometrist to receive an exam and eyeglasses if necessary. Vouchers must be used within 60 days.

Adult Eye Exam/ Eye Glasses Application Application for assistance with eye exam and eyeglasses only. All questions must be completed, or application will not be processed.

_____	_____	_____
NAME	DATE OF BIRTH	NUMBER OF CHILDREN UNDER 18 IN HOUSEHOLD

_____	_____	_____
PARENT/GUARDIAN FULL NAME IF APPLICANT IS A MINOR	MAILING ADDRESS	CITY, STATE, ZIP

Marital Status: (please circle)

MARRIED - DIVORCED - WIDOWED - SINGLE

NAME OF SPOUSE IF APPLICABLE

_____	_____	_____
BEST NUMBER TO REACH YOU	DO YOU WEAR GLASSES NOW	IF YES, FOR HOW LONG

HOW DID YOU HEAR ABOUT THE DANIA LIONS CLUB/ SHARE THE VISION PROGRAM?

Financial qualification: Documentation of eligibility may be requested.

Not limit to but including: Evidence of household income, government assistance such as SNAP or Medicaid.

MAIL:
Dania Beach Lions Club
Share the Vision
PO Box 681 Dania Beach, FL 33004

EMAIL:
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QUESTIONS:
954/ 589-5002