



MOW Sliding Scale Placement Form

Name: _____

Address: _____

Phone Number: _____

You must attach a copy of your most recent CRA Notice of Assessment or Proof of Income Statement and mail to:

New Dawn Meals on Wheels
c/o Kathleen Whelan
P.O. Box 1055
Sydney NS B1P 6J7

OR drop off at:

New Dawn Meals on Wheels Office
170 George Street
Sydney NS