



ADDITIONAL CHARGES REQUISITION: CABLE TV

Please complete one of the following options for Standard Cable TV Charges

OPTION 1: STANDARD CABLE TV

I, _____, hereby agree to pay, on behalf of _____,
Name of Resident or Legal Representative (Financial) *Name of Resident*

the ongoing monthly fee for standard cable television services, on or before the fourth business day of each month.

Date: _____ Signature: _____

OR:

OPTION 2: NO CABLE TV

I, _____, have notified Carewest that I do not require standard cable
Name of Resident or Legal Representative (Financial)

television services in the resident room for _____.
Name of Resident

Date: _____ Signature: _____

The standard cable television package contains over 100 channels. A listing of the channels can be provided in the Business Office.

If additional or specialty channels want to be purchased, you can call Rogers/Shaw directly at 1-844-235-7429.