



14 High Street, Builth Wells, Powys, LD2 3DN

Email: info@builthcs.co.uk

www.builthcs.co.uk

Do we need to know anything else? e.g directions to house/where to park to collect you, do you need help getting in & out of the car, are you unsteady on your feet.

Do you live alone? _____

Who should we contact if any problems arise?

Name _____

Relationship to you _____

Address

Telephone number(s)

Your GP's Name _____

Signed _____

Office use only:

Date received: _____ Date Membership fee paid _____

Accepted onto scheme Yes/No