

DORSET RECLAIM – REFERRAL FORM

This form can be sent by post, email or used when visiting us

Dorset Reclaim, Unit 5, Poundbury Road, Dorchester, DT1 2PG
Tel: (01305) 267711 - **Email:** eric@dorsetreclaim.org.uk

Opening Times: Monday to Thursday: 9.30am - 4.30pm • Friday: 9.30am - 4.00pm

:: Client Information

Client's Name:	
Full Address:	
Tel Number:	

:: Organisation / Agency Information

Referring Organisation:	
Referring Officer:	
Full Address:	
Tel Number:	
Email:	

:: Purchase Information

Required Items:						
Who is responsible for Payment: <i>... Please tick</i>	Agency:	<input type="checkbox"/>	Client:	<input type="checkbox"/>	Jointly:	<input type="checkbox"/>
Maximum Allowance:						

:: Extra Information

Anything else you wish to tell us:	
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- This form is valid for 6 weeks from the date of referral.
- If possible bring transport with you on the day of your visit. Dorset Reclaim offers a delivery service at nominal cost although there may be a delay between your visit and Dorset Reclaim being able to make the delivery.

I can confirm that the referral meets the criteria for the project.

Signed:

Dated: