**Cambridgeshire and** **Peterborough Community**

 **short-term loan equipment**

**To request loan of the equipment** please speak with your therapist or complete the form below and send via email to;

For children known to therapy services (CPFT) in Peterborough - cpm-tr.childrensotcpft@nhs.net

For children known to therapy services (PCC) in Peterborough - adminhsdm@peterborough.gov.uk

For children known to therapy services (CCS) in Cambridgeshire - CCS-TR.therapyreferrals@nhs.net

\*If known, please indicate your child/young person’s therapist.

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| This equipment is appropriately maintained. You are responsible to provide your own risk assessment. |
| Child’s name | Child’s date of birth: | Child’s address: | Parental responsibility: | Contact telephone number |
|  |  |  |  |  |
| Item(s) requested: |
| Please give as much notice as possible and ideally 6 weeks.When do you want to loan period to start?**First choice of dates**:From:To: **Second choice of dates**:From:To:  |

**Delivery and Collection:** This will be through our equipment loan store, NRS Healthcare.