



SHOPMOBILITY, ST HELIER

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Sand Street, St Helier, JE2 3QF
Tel/fax 01534 739672 Mobile: 07700 736797 or 07829 736797
www.shopmobility.org.je

Registration & Health Form and Hire Agreement

Users Name (please print).....

HOME address.....

.....Post Code.....

Telephone number.....Mobile number.....

For visitors please give the name of the hotel.....

Email address (please print).....

I have/have not* similar equipment at home.

I am a member ofShopmobility Scheme

I confirm that as far as I am aware I do not have any condition which would impair my ability safely to operate a **power scooter/powerd wheelchair/quad-walker, push**

chair, toilet or shower seat, other.....* which is to be loaned to me.

I promise to inform Shopmobility, St Helier, immediately in the event that I become aware of any change to my condition which might affect my ability safely to operate the said equipment and agree to undertake a new assessment.

**I agree to hire a commencing on..... and terminating on.....

I leave my Jersey/hotel address at (time).....on (date).....

Shopmobility is insured against damage or injury caused by accident with an excess of £100 which is payable by the hirer if they cause damage which necessitates an insurance claim.

For overnight hirings the equipment must be kept in a dry and secure place and for powered vehicles charged every night by plugging into the mains.

User's signature:.....Signed by SSH.....

Date:.....

*Delete as appropriate. **For overnight hire only.

Please make cheques payable to SHOPMOBILITY or SSHJ