



Guide Dog Services Referral Form - Client

Please complete as much of this form as you can and return to Guide Dogs Tasmania:

Email:

referrals@guidedogstas.com.au

Mail:

Guide Dogs Tasmania
PO Box 82
North Hobart, 7002

Fax: (03) 6232 1221

Date: _____

Title: MR MRS MS
 MISS MASTER Other: _____

First Name: _____

Middle Names: _____

Surname: _____

Date of Birth: _____

Residential Address:

Email Address:

Daytime Phone Number: _____

Mobile Phone Number: _____

Funding Sources (if applicable):

- Department of Veterans Affairs (DVA)**
- National Disability Insurance Scheme (NDIS)**
- Insurance Claim**
- Aged Care Package**
- Better Start Package**
- Other (please provide details below)**

Please provide funding details (relevant registration numbers, contact details):

Do you have adequate fencing to secure a dog on your property:

- YES NO

Do you currently use a mobility aid i.e. (white cane, electronic mobility aid, Guide Dog, Sighted Guide):

- YES NO

Please provide updated medical details:

Ophthalmologist: _____

Practice Name: _____

Address: _____

Optometrist: _____

Practice Name: _____

Address: _____

General Practitioner: _____

Practice Name: _____

Address: _____

Do you have any of the following medical conditions?

- | | | |
|--|--|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Arthritis | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Hearing Impairment |
| <input type="checkbox"/> Hearing Aids Worn | <input type="checkbox"/> Other | |

Any other relevant health information:

Guide Dog Referral process:

On return of the completed referral form, Guide Dogs Tasmania will be in contact to arrange an initial information session about Guide Dog Mobility.

Following this information session, if you meet the required criteria, you will be offered the opportunity to undertake a comprehensive Guide Dog Assessment.

During the information session, you will be required to provide the contacts for at least 3 referees. Please advise these people they may get a call from us.

A medical report and up to date vision report will be obtained during the assessment.

A reasonable level of fitness and stamina are important factors in successfully working with a Guide Dog.

Please note that completion of this referral form does not guarantee or obligate the client to proceed through to a Guide Dog Placement.