

Resistance Bands

Applicant name					
Telephone number					
Email address					
Date of birth					
Address					
		Postcode			
Delivery address: (if different to above)					
Member of The British Polio Fellowship <input type="checkbox"/>		Membership Number (If known)			
Please indicate if you use any of the following		Wheelchair <input type="checkbox"/>	Crutches <input type="checkbox"/>	Calipers <input type="checkbox"/>	Other

Keeping in touch

We would love to keep you posted with our news, events, activities and appeals. Your details will only be used by WheelPower and The British Polio Fellowship – we will never give your information to other organisations to use for their own purposes. You are free to change your mind at any time. Please indicate if you would be happy for us to contact you by:

Email

Phone

Text

Your Privacy

We will always store your personal details securely. We'll use them to provide the service that you have requested, and communicate with you in the way(s) that you have agreed to. Your data may also be used for analysis purposes, to help us provide the best service possible. We will only allow your information to be used by suppliers working on our behalf and we'll only share it if required to do so by law. For full details see our Privacy Policy at www.britishpolio.org.uk/privacypolicy

I give permission for my information to be shared with Wheelpower in order to process this application

Additional Information

- Do not apply if you have an allergy to latex
- Applicants must be fit enough to undertake the activity for which the equipment is used and should seek medical advice from your GP or healthcare professional before undertaking any activity
- WheelPower provides the equipment for use by the participant only in the recommended way in which it is meant to be use

Return your completed application form by email to: matthew@britishpolio.org.uk

Or post to: The British Polio Fellowship, CP House, Otterspool Way, Watford WD25 8HR