

Freedom Wheels Bike Application Form

Please complete and email: projects@tadq.org.au

For more information or assistance completing the form, please contact 07 3216 1733

Client	First Name:	<input type="text"/>	Surname:	<input type="text"/>
	Date of Birth:	<input type="text"/>		
	Address:	<input type="text"/>		
	Suburb:	<input type="text"/>	Postcode:	<input type="text"/>

Contact	<i>Parent/Carer Details</i>			
	First Name:	<input type="text"/>	Surname:	<input type="text"/>
	Home Phone:	<input type="text"/>	Mobile:	<input type="text"/>
	Email:	<input type="text"/>		

Referrer	First Name:	<input type="text"/>	Surname:	<input type="text"/>
	Organisation:	<input type="text"/>	Job title:	<input type="text"/>
	Address:	<input type="text"/>		
		<input type="text"/>	Postcode:	<input type="text"/>
	Phone:	<input type="text"/>	Mobile:	<input type="text"/>
	Email:	<input type="text"/>		

Medical	Medical condition and diagnosis:		<input style="height: 80px;" type="text"/>
	Height cm:	<input type="text"/>	Weight kgs: <input type="text"/>
	Assistance needed for communication:	Yes	No
	Are there any other medical details that we should be aware of:		

Mobility	Are there any mobility aids being used such as walker, powerchair etc, if yes, please describe:		
	Are there any restricted movement in hips / knees / ankles:		
	Have they had botox within the last three months:	Yes	No

Bike	Have they ridden a bike before:		
	What are the main challenges with riding a bike:		
	Are they likely to require the following:		
	Postural support	Thoractic support	Foot cups Unsure

Funding Questions	<i>these questions are optional</i>		
	Country of Birth:	Australia	Other
	Indigenous status:	Torres Strait Islander origin	Aboriginal origin
		Both	Neither
Living arrangements:	Lives with family	Other	

Payment	How will the bike be paid for:		
	Self	NDIS: Reference Number	<input type="text"/>
	CAEATI	Betterstart	Other

How	How did you hear about the freedom Wheels program:		
	Word of mouth	Social Media	Event
	Previous client	Website	Other

Once we receive your request form, a project number will be allocated and you will be contacted regarding and assessment date.

