



Attachment A Specialist Equipment Notification of Receipt

* This form **MUST** be completed, signed and faxed to Lady Gowrie Inclusion Agency (IA) 62 306855 or scanned and emailed to inclusion@gowrie-tas.com.au on receipt of equipment.

Early Childhood and Child Care Service Name:

Address:

Contact Number:

Type of equipment on loan:

Equipment code number:

Date loan commenced:

Please indicate when the following tasks have been completed:

Task Completed	Date	Accountable Person/s
Equipment Delivered to service		N/A
Therapist contacted and attends centre		Name of therapist:
Therapist checks and fits/adjusts equipment to meet child's needs		Name of therapist:
Educators <ul style="list-style-type: none"> • familiarised with equipment • instructed on safe and correct use • instructed on how to move child 		Names of educators instructed:

Directors Name:

Signature:

Therapist's Name:

Signature:

Date Fax sent:

Fax: 62 306855

Lady Gowrie Tasmania Inc. excludes liability for any damage whatsoever, caused or contributed to in any manner by the use of equipment or resources supplied pursuant to this agreement, including by negligence.

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