

PUPIL



PALS

Referral form for care homes

Omega is working with primary schools to deliver Pupil Pals; a free befriending service in which socially isolated and lonely clients receive regular cards and pictures made for Omega by creative children. Complete this form to refer your clients.

This form is for professionals to refer multiple care home residents to Pupil Pals.

Section I - About you (the referrer)

Name:

Job title:

Phone:

Email:

How did you hear about Omega?

Care home:

Address line 1:

Address line 2:

Town / city:

County:

Postcode:

Declaration:

I hereby acknowledge that the persons listed overleaf are residents at the above named care home. They have consented to this referral and understand that Omega will store their information for the purposes of delivering support services. I agree to act as the emergency contact person for those referred.

Signed:

Date:

Tick to subscribe to the Omega Newsletter by:

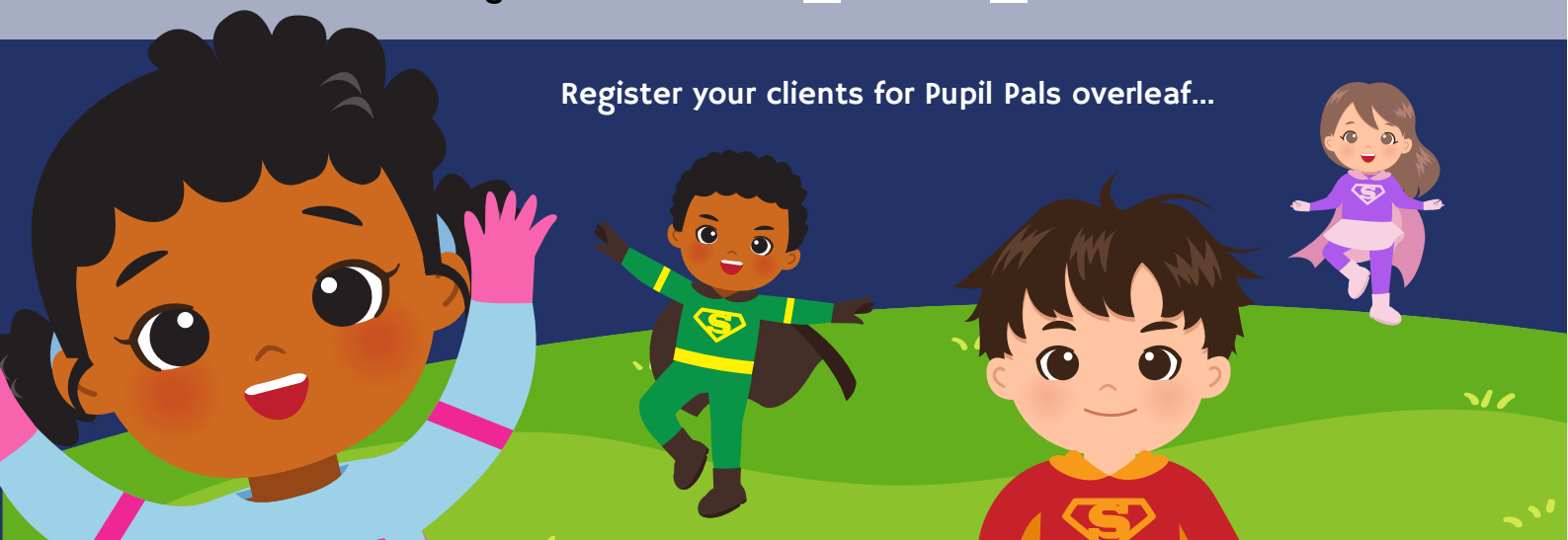
☐

Email

☐

Post

Register your clients for Pupil Pals overleaf...



Section 2 · About the clients

Name	Date of birth	Ethnicity	Sexual orientation

Post this form to: Pupil Pals, Omega, London House, Town Walls, Shrewsbury, SY1 1TX