

BED ASSESSMENT SCRIPT FORM

IMPORTANT!

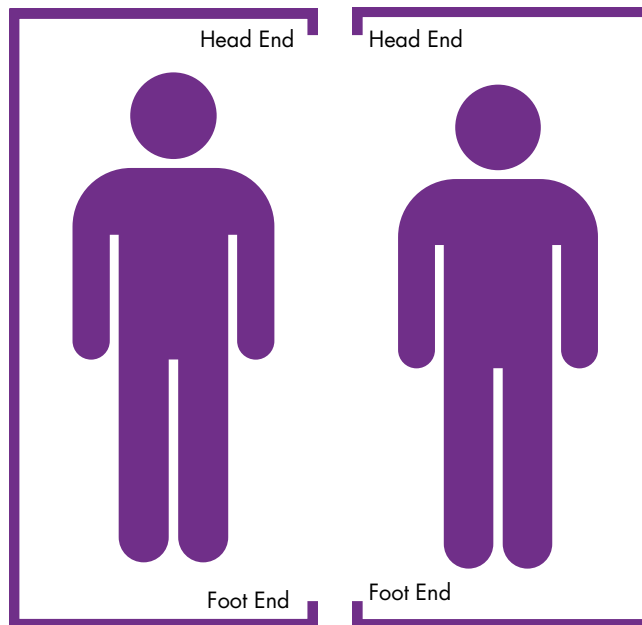
1. Please ensure the client's bedroom layout is considered when confirming the sleeping side of the bed users (e.g. access to bathroom, carer access etc.).
2. Any two Icare bed models can be used in a partner set-up.
3. The client must sign the form to confirm they understand and confirm the bed layout before manufacturing process can begin.
4. Please complete all information on this form before submission.
5. Note: When the partner set-up (two beds) are in place, there is NO gap between the mattresses.

Client Name: Reference: (Must not be left blank):

Referrer Name: Phone Number:

Email:

Equipment Supplier: Store Contact:



Bed Size: Bed Size:

Bed Model: Bed Model:

Fabric Colour: Fabric Colour:

Signature:

Date: