

Dementia Support Service Enquiry Form

This form is an enquiry form for the St John's Dementia Support Service. By completing this form, you agree for someone from the Dementia Team to contact you directly. You can also complete this form on behalf of another person, but you will need their consent to do this.

Contact Details:			
Your Name:			
Address:			
Email:			
Landline:			
Mobile:			
Preferred Method of Contact:			
Please complete this section if you are applying on behalf of another person:			
Name of organisation or nature of your relationship with the person:			
Contact Name:			
Do you have the consent of the person for whom you are applying?	YES	NO	

Your Contact Details:			
Email:			
Office / home Number:			
Mobile Number:			
Preferred Method of Contact:			
About you:- The family, the Carer and the person living with dementia			
Please provide additional information here about any specific questions you have about The Dementia Support Service?			
Has there been a formal diagnosis of dementia?	Please state diagnosis. _____	YES	NO
Is the person living with dementia or their carer over the age of 55?	If NO please state reason for enquiry below. _____	YES	NO
Additional information to help the dementia support team understand the level of support required.			

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Please return to:

Dementia Support Service, St John's Winchester,
32 St John's South, The Broadway, Winchester, SO23 9LN.

If you have any questions regarding this service, please contact the dementia support team by calling 01962 858 282 or by emailing dementiasupport@stjohnswinchester.co.uk.

Thank you for taking time to complete this form. Someone will be in contact within 72 hours of receiving your enquiry.