

## Request a Rainbow Application Form

Please complete all fields on this form, If you have any questions, please call 0560 364 9391 or email us at [info@reusefuluk.org](mailto:info@reusefuluk.org)

Name of Parent \_\_\_\_\_

Address \_\_\_\_\_

Contact Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Name of Child \_\_\_\_\_ Age of Child \_\_\_\_\_

Any other Siblings \_\_\_\_\_

What condition does your child have? How does this limit and effect their living?

What difference will a Box of Rainbows make to your child?

What challenges does your child face on a day to day basis?

What does your child like? (favourite colour/dinosaurs/butterflies etc..)

What doesn't your child like? (spiders.)

If selected, your child will receive a Box of Rainbows on a monthly basis and the project will run for 6 months.

Each month we will ask for your feedback and how our Boxes of Rainbows are making a difference. From time to time, we may be required to take photographs of children with their boxes and creations for our funders. Please tick this box to grant permission for us to do so, and to hold the information you have supplied.

Signed ..... Dated .....