

Thamesdown Hydrotherapy Pool

On the next page to this document is a printable treatment card.

Please fill in & bring it to the Thamesdown Hydrotherapy Pool, where our staff will happy to discuss your treatment requirements & general use of the pool.

We look forward to meeting you.

(To print out this treatment form, click on File and select print)

THAMESDOWN HYDROTHERAPY POOL

Request for Hydrotherapy Pool treatment

This patient would benefit from the use of Thamesdown Hydrotherapy Pool and would appreciate sessions being made available at mutual convenience. There is a charge for this service. Please take a leaflet.

Name:	Date:
Address	Sex: M/F
Telephone No. (If Known):	
Age Group in years: 0-4 5-16 17-20 21-30 31-40 41-50 (circle group)	
51-60 61-70 71-80 81-90 91-100	
Condition requiring Hydrotherapy:	
Any other medical condition:	
Duration of Use: 3 Months 6 Months 1 Year	
Practitioner's Stamp	
Signed	

Thamesdown Hydrotherapy Pool Association
 Jeffries Avenue, Off Cricklade Road, Swindon. SN2 7HJ. Tel: (01793) 496002
 Manager: Mr Neil Montgomery. Assistant Manager: Mrs. Jan Platt