



Public Health Development Service

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# SUCCESS THROUGH SPORT REFERRAL FORM

This form is for the Referrers Use Only

Name of client referred:

Client's address:

Client's full postcode:  Telephone no:

Date of Birth:

Referrer's contact details:   
Address:    
Tel:

Date:  /  /   
                  D    D                    M    M                    Y    Y    Y    Y

The project will support unemployed men aged 18-25 by delivering practical opportunities that increase their confidence and motivation to improve their employability and general health. Physical activities will be central to the project and provided by City in the Community (MCFC) and the Health Trainer Programme (NHS).

Where would the client prefer to do the training?  Platt Lane Leisure Complex (Fallowfield)   
*(tick one box )*  Nicholls Campus (Ardwick)

You can send the completed form or make further enquiries to this freepost address:   
**Manchester Community Health Trainers, Business Reply Licence NO. RRBL – ASHX – YYCB,, Manchester Public Health Development Service, Victoria Mill, Lower Vickers Street, Miles Platting, Manchester. M40 7LJ**

Official use only      Outcome:  couldn't make contact   
 didn't want service at this time   
 booked in for first visit   
 didn't meet service criteria