

Customer Reference Group Expression of Interest

Full name: _____

Contact phone: _____

Email address: _____

What is your involvement with Therapy Focus (if any)?

What do you believe you can contribute to the Customer Reference Group?

How did you find out about the Customer Reference Group and what is your interest in joining?

Declaration

I, _____ (full name)

consent to act as a member of the Therapy Focus Customer Reference Group, and if I am appointed, declare that I not aware of any legal impediment (financial, personal or otherwise) that would deem me unfit for the position.

Signature: _____ Date: _____

Please return:

- In person to 5/1140 Albany Highway, Bentley, WA 6102
- By post to Therapy Focus Ltd, PO Box 20, Bentley WA 6982
- By email to brand@therapyfocus.org.au