



# Referral Form

## Free Cakes for Kids Reading

Please try to give 2 weeks' notice where possible, although we'll try to help at shorter notice.

Date of referral: \_\_\_\_\_

Name of referee and organisation: \_\_\_\_\_

Telephone number of referee: \_\_\_\_\_

Parent/guardian's name (if happy to disclose): \_\_\_\_\_

Parent/guardian's contact number (if happy to disclose): \_\_\_\_\_

Child's name: \_\_\_\_\_  Male  
 Female

Date of birthday: \_\_\_\_\_ Age on birthday: \_\_\_\_\_

Date cake needed for (if different from birthday): \_\_\_\_\_

Delivery address (referral centre or other location?): \_\_\_\_\_

Preferred cake (plain sponge, chocolate etc) \_\_\_\_\_

Any allergies/intolerances: \_\_\_\_\_

Child's interests/likes/favourite characters etc \_\_\_\_\_

Why are they having contact with your organisation? \_\_\_\_\_

Please give some brief details about the family's circumstances, including why they are unable to provide a cake themselves: \_\_\_\_\_

Other information we might need to know? \_\_\_\_\_

We like to share photos of our cakes on our website and FaceBook page. Are the family ok for us to do this with this cake? Please state if it's ok to do it, but without the name visible. \_\_\_\_\_