Registration of Carer

I would like it recorded on my personal medical records (and where applicable of the person I care for) that I am a carer:

Carer:	
Full Name:	
Address:	
	Postcode:
Home Telephone:	Mobile Telephone:
Signature:	
Person cared for:	
Full Name:	
	Postcode:
Home Telephone:	Mobile Telephone:
GP Surgery:	
I am cared for and supported by the person wherecorded on my medical records and my carer	
Signature:	
	consent for my details to be passed onto Cheshire e /would not like (delete as appropriate) to receive rmation from the centre.
Carer's signature:	
Person cared for signature:	

Cheshire and Warrington Carers' Centre 0800 0850 307 provide support and information including your benefits and rights as a carer.

Crossroads Care 01260 292850 provide practical support to carers and people with care needs. Making Space 01925 571680 provide support for people caring for someone with mental health problems, dementia or learning difficulties.

Contact a Family 0808 8083 555 provide advice, information and support to families with disabled children across the UK.

Alzheimer's Society - Macclesfield 01625 503302 Crewe 01270 501901