

## Hearing Aid or Remote Microphone Repair Form

Date: \_\_\_\_\_ Senders Name: \_\_\_\_\_

Senders Email and contact Ph: \_\_\_\_\_

### Hearing Equipment Wearers Details

Male/Female (circle one)

Hearing Aid Wearer's Audiology Clinic: \_\_\_\_\_

Hearing Aid Wearer's First Name: \_\_\_\_\_ Hearing Aid Wearer's Surname: \_\_\_\_\_

Hearing Aid Wearer's DOB: \_\_\_\_\_ Hearing Aid Wearer's NHI#: \_\_\_\_\_

Hearing aid Wearer's Home Address: \_\_\_\_\_

\_\_\_\_\_

### Address where equipment is to be returned to:

*Please be sure to name someone to accept responsibility of receiving the repaired equipment back: eg SENCO.*

\_\_\_\_\_

\_\_\_\_\_

### Equipment Details

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial No: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial No: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial No: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial No: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial No: \_\_\_\_\_

### Fault Description

*Please make note of any additional accessories/cables or earmould/s that have been included to ensure that they are returned.*

*Ko Taku Reo will fund the repair of, and batteries/accessories required by, hearing aids and remote microphone systems issued by the Ministry of Education and the Ministry of Health\* This is funded by Ko Taku Reo's operating grant and is free of charge to children and young adults who met the eligibility criteria. Please visit our website or call the Assistive Technology Co-Ordinator on 0800 3324 235 for further information.*