



THE ROYAL AIR FORCE AND DEPENDANTS DISABLED HOLIDAY TRUST

(Registered under the Charities Act 1960 No. 286019)

Miss B Tomkins, 67 Portland Place, London, W1B 1AR
Telephone: 0207 3073 303

Service and Disability Questionnaire

Surname (Mr/Mrs/Miss) _____ Initials _____

Address _____

Postcode _____ Telephone Number _____

Dates of service _____ to _____

Date of Birth _____ Service Number _____ Rank last held _____

Was service Regular, War Service or National Service? _____

Are you a War Pensioner? _____ If Yes, please state percentage disability awarded _____%

Relationship of disabled person to ex-RAF or RAF person (if not the same person)

Please state nature of disability _____

What effect does this have on mobility? _____

Does the disabled person use a wheelchair full-time? _____

If not, is a wheelchair used sometimes? _____

Holiday location preferences _____

Preferred time of year for holiday _____

Could you take a holiday booking at short notice (2 months)? _____

Do you agree to this information being held on computer by the Trust? _____

Signature _____ Date _____

Your signature will be taken as confirmation that you will pay your own travel expenses and will provide your own nursing companion or helper, as necessary. However it should be noted that financial assistance with air fares may be available on a means-tested basis.

You may use the other side of this questionnaire for any additional helpful information.

Finally how did you hear about the Trust?

1. Word of mouth
2. Royal Air Force on discharge
3. SSAFA, Forces Help
4. War Pensions Agency
5. RAF Benevolent Fund or RAFA
6. Other, please specify

When completed, please return this questionnaire to the address at the top.