

Project User Groups Consumer/Carer Expression of Interest Application Form

Full Name:

Residential Address:

Email Address:

Phone number:

I am (please tick):

- A consumer
 A carer
 Both

I have accessed services from the Wentworth Health Service (Wentworth Hospital) in the last two years:

- Yes No

I am interested in being a member of the (please tick one or more):

- Inpatient Unit PUG
 Urgent Care Centre PUG
 Ambulatory Care/Community Health PUG

I am interested in being a member of a Project User Group because:

I can attend an Orientation session and PUG meetings as required: Yes No

**Please email your application form to HI-Wentworth@health.nsw.gov.au
by 5pm, Friday 7 October 2022.**