



KWAKIUTL HEALTH CENTRE

97 TSAKIS WAY, FORT RUPERT
 PO BOX 1440, PORT HARDY, BC, VON2P0
 PH: 250-949-6625 FAX: 250-902-2246

PATIENT TRAVEL REQUEST

Darlene Peeler, Patient Travel Clerk - Office hours: 8:00 a.m. - 4:00

Cell: 250 230-2378

Fax: 250 902-2246

Email: patient.travel@kwakiutl.bc.ca

This form MUST be completed and submitted to the Patient Travel Clerk by YOU, along with your Notice of Appointment at least 10 working days before your appointment.

Your doctor needs to state why you need an escort.

- I acknowledge that if my appointment is cancelled, it is my responsibility to cancel my hotel accommodations, and then notify the Patient Travel Clerk.
- I acknowledge that I am responsible and will make personal restitution for any damages or extra expenses incurred at the hotel.

Name			
Status Number		Birth Date	
Home Address			
Your Contact Number			
Appointment Date		Appointment Time	
Appointment Address			
Physician Name			
Transportation (CIRCLE ONE)	PRIVATE VEHICLE	COMMERCIAL BUSLINE	WHEELS FOR WELLNESS AIRPLANE
Accommodation (CIRCLE ONE)	HOTEL/MOTEL	PRIVATE ACCOMODATION	DAY TRIP-NO ACCOMODATION
Accommodation Check-in Date		Accommodation Check-out Date	Wheelchair Accessible room?
Medical Escort Required?		Number of Beds required	
DATE SUBMITTED TO KWAKIUTL HEALTH CENTRE		CLIENT INITIALS	ACCEPTED BY (initials)