



Suite L6 Enterprise Building
 The Innovation Hub
 Mark Shuttleworth Street
 Pretoria
 Tel: 012 844 0405
 Fax: 086 524 1499
www.jumpingkids.org.za
 A non-profit company:
 2009/018078/08
 PBO registered: 930 032 918

Industry Partner Application Form

Are you an industry professional working in the field of prosthetics, orthotics, physiotherapy or rehabilitation and would like to GET INVOLVED?

Complete the sections below and let us know how you would like to help more children living with lower limb amputations or deficiencies to get the assistance they need.

Questionnaire

What is your area of expertise? (Please tick / complete the appropriate section)

- Prosthetist
- Orthotist
- Orthopaedic Surgeon
- Physiotherapist
- Other (please specify)

Personal Information (Please complete)

Name and Surname:

Name of organisation:

Practice number:

Region of operation:

Physical Address:

Contact Details

Landline:

Mobile:

Email:

How would you like to GET INVOLVED? (Please tick / complete the appropriate section)

- Donate/sponsor prosthetic components
 - Donate/sponsor expertise
 - Donate/sponsor a service
 - Donate/sponsor a child
 - Other (please specify)
-

What prompted you to GET INVOLVED and what are your expectations?

Please add your motivation here.

Please note that terms and conditions apply, and that the fund is governed by an independent board. The board's decisions are final. All applications received are reviewed bi-monthly and industry partners are notified of the outcome via email/mail.

I, _____ (name) understand that this is an application process and that no partnerships are guaranteed. I declare the above information to be accurate and true.

Signature

Date