**BEACH ACCESS WHEELCHAIR – LOAN AGREEMENT**

The Beach Wheelchair Chair is a community resource. The City of Greater Geraldton is committed to maintaining it in a good working order. The Beach Wheel Chair is currently stored by 2 Foreshore Café however booking must first be done via Customer Service at the Civic Centre.

Please ensure that all reasonable steps are taken to return it in the same order as it is loaned.

**Terms and Conditions of Loan**

The applicant named below agrees to abide by the following conditions in relation to their hire of the Chair and to pay all costs and expensed caused by any failure to do so:

1. Not to damage or alter it in any way.
2. At the end of the hire period to return it to the place of collection in a clean condition and in good and proper working order having regard for the condition it was in at the commencement of the hire.
3. Not to use it for any purpose other than its intended purpose as detailed in the Guidelines for Use, or to allow to be done, or to do anything that may cause it to be vulnerable to damage.
4. To comply with the Guidelines for Use at all times.
5. To comply with any lawful directions which may be given by the City which also reserves the right to grant or refuse loan applications, or cancel a booking as it thinks fit and shall be the final authority in this respect.
6. To indemnify the City against any claim, loss or expense which may be made or arise as a result of the use of the Beach Wheelchair during the loan period.
7. That it is an express condition of this Agreement that the City shall not accept liability for any damage, illness or injury caused or found to be caused to any person or property as a result of the use of the Chair including the applicant or any other person using it during the loan period with or without the consent of the applicant.

|  |
| --- |
| **BEACH ACCESS WHEELCHAIR – GUIDELINES FOR USE** |

**Who can use the Beach Wheelchair?**

Consultation with a health professional should occur prior to use of the Chair if a person has balance or sitting difficulties or if the person is prone to pressure sores or pain conditions.

Persons or carers must take into consideration any specific issues relating to the person’s disability, which may affect the use of the Chair.

The Chair is designed to be pushed by someone other than the person sitting in it. Users should not try to manoeuvre it on their own.

**Transferring into the Beach Wheelchair**

The Chair has over size wheels. Special care is needed in transferring persons into and out of it due to the longer distance over the wheels to the seat and users should not attempt to transfer without assistance. Armrests can be removed to aid transfers.

The Chair does not have brakes. Transfers must occur on a flat surface with assistance to hold the wheelchair in position.

**Using the Beach Wheelchair**

The Chair should be used under the supervision of two appropriate adult carers for water activities and a minimum of one adult care for other activities.

It is suitable for use on sand and some hiking paths. It is not an all terrain product and should never be used on uneven terrain or steep slopes as it may tip over.

The Chair can become difficult to push in deep sand and if the person sitting in it is large.

It may float in the water and the manufacturers recommend a maximum depth of 15cm. It has been used in deeper water by steadying it with enough people however it must never be used as a floatation device.

As a safety measure, straps should not be used when entering the water.

The Chair should not be used in wave or surf conditions.

|  |
| --- |
| **BEACH ACCESS WHEELCHAIR – LOAN AGREEMENT** |

I agree to use the Beach Access Wheelchair in accordance with the “Guidelines for Use” and “Loan Agreement”. Furthermore, I agree to be responsible for the cost of repairs to the wheelchair should any damage occur.

|  |  |
| --- | --- |
| **Name:** |  |
| **Address:** |  |
|  |  |
| **Organisation:** |  |
| **Phone Number:** |  |
| **Mobile Number:** |  |
| **Email:** |  |
| **Driver’s License Number:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Signature:** |  |

Wheelchair to be collected **TIME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wheelchair to be returned **TIME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **OFFICE USE ONLY** |

Issued by (City staff only): Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_

Wheelchair Received by: Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_

Completed form to be scanned into DAIP file