

**REQUEST FOR VISITOR PARKING SEASON TICKET**

This is to verify that **Mr/Mrs/Miss/Ms**

Please tick the appropriate box below;

- Where the hospital is asking for relatives to play an active role in the patients recuperation/rehabilitation prior to and post discharge
- Visitors of intensive and critical care patients
- Visitors of "out of area" patients living locally/on site to enable short term repeat visits
- Visitors of long stay patients, i.e. more than 1 week. At the special request of Sister/Charge Nurse of the relevant ward

on **Ward / Unit**

for **weeks at the cost of £12.00 per week. Total** £

**Car Registration Number** .....

To obtain a Visitor Parking Season ticket you must take this completed form signed by the ward / Dept you are receiving treatment from to the Cashier's Office, Finance Department, SDH Central (open 09:00 – 12 noon Monday to Friday, Ex BHDS), or from the Transport Desk, Main Reception, SDH North (open from 09:00 to 16:00 Monday to Thursday and Friday 09:00 to 15:30 Ex BHDS) or Facilities HQ SDH South (open from 09:00 to 16:00 Monday to Friday, Ex BHDS).

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 For Ward Staff to complete  
 Name of person authorising request .....  
 Signature .....  
 Work Title..... Date .....