Name:

Address:

Date:

 **MANAGED ACCOUNT**

I would like IDK Support 4 You to manager my Social Care Monies, I am aware that I may have to make a contribution towards my care each week.

I am aware that if I do not pay my contribution that this may affect the amount of care I will receive.

**CONFIDENTIALITY**

I am aware that IDK Support 4 You Ltd, may be required to share information with relevant 3rd parties but will not pass information outside of the organisation unless required in the service I have requested.

Signature Client………………………………………………………………………..

Signature IDK Support 4 You Ltd………………………………………………..