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|  | On the first page select "No, this form is about someone else" |
| Click  **Next ->**  to take you to the next page | |
|  | This page is asking you for the details of the person who is at risk. This helps us link the details to our CareFirst system.  **NB. If you don't have a mobile phone then just enter a contact number, for the person.** |
| Click  **Next ->**  to take you to the next page | |
|  | On this page enter **your** details. |
| Click  **Next ->**  to take you to the next page | |
|  | This page is the start of the form proper. Please fill in the following pages of this form **as completely as you can** with the information available to you.  Some questions are required and marked with an asterisk \*.  It will ask you for some of the same details as above, this is expected – please complete.  A navigation of the form sections is found on the right. |
| When the form is complete click  **Submit**  to send the form us. You will receive a confirmation email that the form has been submitted. | |