



Date: 2017-12-12

Dr. Dr Martin Doris

Medical Center : Strive Health and Physiotherapy Kirwan

GP Telephone : 07 4773 6133

GP Fax No. : 0747737233

RE: REQUEST FOR REFERRAL

Jason Theiss is interested in taking part in the specific dietitian services program provided by **Fuel Your Life**. This is a comprehensive nutrition program that will greatly assist **Jason Theiss** in achieving their nutrition and health goals. So that we can provide these services, we ask that you could please complete this referral.

Client consented to referral: Yes

COULD YOU PLEASE COMPLETE AND FAX A REFERRAL FOR :

Patient : Jason Theiss DOB : 13.04.1967.

Address: 51 Tennessee Way, Kelso Townsville QLD 4815

Phone: 0747740292 or 0418127008

Medicare #:

DVA file # (if applicable): Gold: QSM18863

DVA White Card conditions (if applicable):

(Provider Type)

Doctor

Business name: Fuel Your Life

Name: _____

Postal address: PO Box 303, BliBli, QLD 4560

Provider #: _____

Phone: 0401 302 872

Condition/s to be treated:

Fax: (07) 3905 1855

Signature: _____ Date: _____

Should you prefer to review Jason Theiss prior to signing the referral, please advise and we will advise Jason Theiss accordingly. We look forward to making a difference in the life of this patient.

Kind regards,

Tyson Tripcony

Managing Director - Fuel Your Life