

Receipt of Speech Generating Communication Device

Classification: Protected A (when completed)

Alberta Aids to Daily Living

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I understand and confirm, by my signature below (or that of a parent or legal guardian), the following:

- I have received my recommended Speech Generating Communication Device (SGCD)
- I confirm that I am satisfied with the SGCD provided to me
- The SGCD is provided for my use for communication purposes and I agree to use it for the purposes for which it was intended and in accordance with applicable AADL policies and procedures
- I accept sole responsibility and liability for all activities that occur through the use of the SGCD
- I am responsible for the routine care and maintenance of the SGCD.
- I have been advised to obtain personal insurance at my own expense to replace the SGCD if it is lost, stolen or damaged beyond repair due to misuse
- I will return the SGCD to the Service Centre when it is no longer needed

Device Name:	Serial No:
Accessories:	
Mounting:	
Access equipment:	
Client Name:	PHN:
Signature of client/parent/legal guardian	
Date equipment received by client:	
Authorizer / Service Centre:	