

Bloom Recovery Network, LLC DIP Intake

Name: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Gender: _____ Date of Birth: _____ Do you smoke? _____ smoking rooms may be available

Do you need a handicap accessible room? _____ Please list any other special needs, including food allergies: _____

Would you like a single room occupancy? _____ *Single room rate is an additional \$125

Has the court ordered a specific completion date? If so, please specify: _____

What month do you wish to attend DIP? _____

Sentencing Court: _____

Sentencing Judge: _____

Case Number: _____

Attorney and Attorney contact information if you wish to have information shared:
(Authorization for release of information will need to be signed prior):

\$100 is due at time of registration. The remaining balance must be paid in full at least one week prior to program start date.

Amount of deposit: _____ or Paid in full amount: _____

Please make checks or money orders payable to: Bloom Recovery Network

Mail completed forms and payment to:

Bloom Recovery Network, LLC

222 S. Elizabeth St. Lima, OH 45801

Or call to schedule an appointment (Note: Office is open by appointment ONLY):

419-308-1119 / 419-575-7070

Form completed by: _____

Bloom Recovery Network, LLC Driver's Intervention Program

DIP cost:

\$375

DIP located at:

Wingate by Wyndham Lima

175 W. Market St.

Lima, OH 45801

DIP 2016 dates:

September 17-20th 2015

October 15-18th 2015

November 19-22nd 2015

December 17-20th 2015

January 21-24th 2016

February 18-21st 2016

March 17-20th 2016

April 21-24th 2016

May 19-22nd 2016

June 16-19th 2016

July 21-24th 2016

August 18-21st 2016

September 15-18th 2016

October 20-23rd 2016

November 17-20th 2016

December 15-18th 2016

***DIP dates are subject to change**