

Hello.. Just a reminder that we are encouraging Patients to give their views about how the practice is doing. We now have a Patient Reference Group to find out the opinions of a representative group of patients, (limited to approximately 100), and have been asking if people would like to provide their e-mail address so we can contact you by e-mail every now and again to ask you a question or two.

Are you interested in leaving your e-mail address?

If so, please ask at reception for a sign up form....Thank you

If you are happy for us to contact you periodically by email please leave your details below and hand this form back to reception.

lame:	
mail address:	
Postcode:	

This additional information will help to make sure we try to speak to a representative sample of the patients that are registered at this practice. Are you? Male ~ Female ~

Age: Group	Under 16	~	17 – 24	~
	25 – 34	~	35 – 44	~
	45 – 54	~	55 – 64	~
	65 – 74	~	75 – 84	~
	Over 84	~		

To help us ensure our contact list is representative of our local community please indicate which of the following ethnic background you would most closely identify with?

White					
British Group		Irish	~		
Mixed					
White & Black Caribbean	~	White & Black African	2	White & Asian	~
Asian or Asian British					
Indian	2	Pakistani	~	Bangladeshi	~
Black or Black British					
Caribbean	2	African	-		200 200 200
Chinese or other ethnic Group					
Chinese	~	Any Other			

How would you describe how often you come to the practice?

Regularly	~
Occasionally	~
Very rarely	~

Thank you. Please note that no medical information or questions will be responded to. The information you supply us will be used lawfully, in accordance with the Data Protection Act 1998. The Data Protection Act 1998 gives you the right to know what information is held about you, and sets out rules to make sure that this information is handled properly.