

BENNFIELD SURGERY - PATIENT REGISTRATION DETAILS

TWO forms of identity must be produced – see overleaf for details.

*** THESE SECTIONS MUST BE COMPLETED**

PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS

*** DATE OF APPLICATION:** _____

*** HAVE YOU EVER BEEN REGISTERED AT THIS PRACTICE BEFORE? YES NO**

*** FIRST LANGUAGE * FIRST NAME:** _____ *** MALE/FEMALE**
(please circle)
(as on birth certificate)

*** SURNAME:** _____ *** MR/MRS/MISS/MS/OTHER** (please circle)

MAIDEN NAME: _____ *** PLACE OF BIRTH IN UK:** _____

*** DATE OF BIRTH:** _____ *** NHS No:** _____

*** LOCAL ADDRESS:** _____

*** HOME TEL. NO:** _____

WORK TEL. NO: _____ **MOBILE NO:** _____

*** PREVIOUS ADDRESS:** _____

*** NAME AND ADDRESS
OF PREVIOUS GP:** _____

*** REASON FOR LEAVING PREVIOUS GP:** _____

*** ETHNIC ORIGIN:** _____

*** DATE LAST ENTERED UK** _____

Foreign Nationals:

*** PLACE OF BIRTH** _____

*** WHEN ENTERED UK** _____

*** TYPE OF VISA:** _____

*** ARE YOU A CARER FOR A MEMBER OF YOUR FAMILY? YES NO**

Please allow 7 days for your application to be processed. Thank you.

*** All sections must be completed for application to be processed.**

Thank you for applying to join Bennfield Surgery Patient List. We offer a wide range of services and these can be found in our patient leaflet. If you would like a copy of this please ask at the reception desk and one of our members of staff will be only too happy to give you one.

When you apply to be registered as a patient you will be required to provide us with two forms of proof of identity. One form of photo ID (eg: passport/driving licence/identity card) or a valid NHS registration card, birth/marriage certificate; plus proof of address in the form of a utility bill, bank statement or pay slip.

We will need to keep a copy of this until your registration has been accepted by the local Primary Care Trust. We will then destroy the copy we have and will not keep it on your medical record.

Once you are registered we would like you to make an appointment with a nurse for a new patient health check. This is also important so that we may have a full understanding of your health needs.

We would like to consider ourselves a friendly, welcoming practice and enjoy good relationships with the majority of our patients.

However, we do operate a “zero tolerance” policy on violence, verbal or physical abuse. Visitors who are aggressive or abusive will be asked to leave the premises.

Please remember appointments are of a premium and we would appreciate that if unable to attend, you would give us as much notice as possible.

Warnings will be issued for persistent non-attendance for appointments.