

Name		
Date of Birth		
Ethnicity	White British <input type="radio"/> Black British <input type="radio"/> Asian British <input type="radio"/> Other/ Mixed Race <input type="radio"/>	
Language	(if not English)	
	Primary care giver	Secondary care giver
Name / Surname		
Relationship to Patient		
Current Address		
Postcode		
Contact details:		
Home Phone		
Mobile Phone		
Email		

Has the patient been known by any other names?	
Name /Surname	
Does the patient smoke or consume alcohol?	
Details:	

Is there an absent parent or other parent who has parental responsibility for this patient? (e.g Guardian / Foster care / Relative) If yes, please give contact details below	
Name / Surname	
Relationship to patient	
Contact details Phone No. / Email	
Are there any other services involving the patient? (e.g Social care / CAMHS)	
Details:	

Has the patient ever been diagnosed with a significant medical condition?
(e.g Asthma / Diabetes / etc.)

Details:

Does the Patient have any allergies?

Details:

Repeat prescriptions

If the patient is on any repeat medication – this will need to be put on repeat before it can be issued. Please let reception know when you receive your welcome letter so this can be reviewed and added.

Online access to appointments and prescriptions is available at - www.westernroadsurgery.co.uk

Pharmacy

Would you like to nominate a local pharmacy?.....

General Data Protection Regulations

Please tick the box below if you consent to the Practice contacting you from time to time with regards to your healthcare in the form of information about the Practice; invitation to attend specialist vaccination clinics etc.

☐ I **do** consent to the Practice contacting me by telephone, post or by email.

☐ I **do not** consent to the practice contacting me by telephone, post or by email.

Signed _____ Printed _____

Please submit photographic ID of patient and/or parent to the surgery with your complete registration. Ensure all questions are answered to avoid delays.

Reception Use Only:

ID TYPE

ID NUMBER