

LANGLEY CORNER SURGERY
**Collection of patient email addresses
& mobile telephone numbers**

Langley Corner surgery is collecting patient email addresses and mobile telephone numbers so that we can provide new and better service by sending you appointment reminders and advise you when certain medical check ups, personal to you, are due.

If you are happy for us to hold this information and use it in the way described above, please would you fill in this form and hand it to a receptionist.

NAME

DATE OF BIRTH

EMAIL ADDRESS

MOBILE TELEPHONE NUMBER

	Text	Email
Tick here if you are happy to receive appointment reminders by:	<input type="checkbox"/>	<input type="checkbox"/>
Tick here if you are happy to receive health related information – eg – ‘flu clinics and/or test results’	<input type="checkbox"/>	<input type="checkbox"/>

Signed..... **Date**

Please bring this signed form with you when you next come into the surgery