**CHANGE OF PERSONAL DETAILS**

Please let us know as soon as possible if you change your address, telephone number or name. It is important that we have up to date contact details in case we need to contact you. Please enter your responses in the yellow boxes.

|  |  |
| --- | --- |
| **Surname registered with at practice:** | **Forename:** |
|  |  |
| **Date of birth:** | **Email address:** |
|  |  |
|  | |
| **Change of name** | |
| Previous surname | If your name has changed due to Marriage or by Deed Poll, can you please provide us with a copy of the appropriate document (requirement of Department of Health). |
|  |
|  | |
| **Change of address:** | |
| **New address (inc postcode):** | If you have changed your address, please check that you still live in our [catchment area](https://19beaumontstreet.co.uk/join-the-practice)  If you are outside this area then you will either need to register with a [GP surgery near you](https://www.nhs.uk/service-search/find-a-gp) or re-register with us as an [Out-of-Area patient](https://19beaumontstreet.co.uk/join-the-practice).  Please note that certain conditions apply to Out-of-Area registrations. |
|  |
| **Previous address (inc postcode):** |
|  |
| **Please list family members moving with you:** | |
|  | |
|  | |
| **Update email address** | |
| **Current email address:** |  |
| **New email address:** | **Do you agree to us emailing you information about your health and treatment to the email address you have provided? (Yes or no)** |
|  |  |
|  | |
| **Update contact numbers** | |
| **Current telephone number:** |  |
| **New telephone number:** | **Do you agree to us sending you text messages and alerts to the mobile number you have provided? (Yes or no)** |
|  |  |

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| **Update how we contact you** | | |
| Please use this form to let us know how you would like us to contact you. If we need to contact you by phone, text or email, we will use the contact details you have provided to us. To protect your confidentiality, please let us know immediately if your details change. | | |
| **Voicemail and answerphone messages** | | |
| **If you are not available when we call, can we leave a voicemail/ answerphone message on the phone number you have provided? (Yes or no)** | |  |
| **Text Messages** | | |
| We would like to send you occasional text/SMS messages or alerts. For example, to confirm your appointment, notify you that your test result is available and remind you about check-ups, immunisations or health services that may benefit you. | | |
| **Do you agree to us sending you text messages and alerts to the mobile phone number you have provided? (Yes or No)** |  | |
| **Email** | | |
| We may want to communicate with you by email from time to time – for example, to respond to your queries, send you information about your treatment or to organise a medical certificate. To find out more about the precautions we take when emailing your information. [How we use your info](https://19beaumontstreet.co.uk/how-we-use-your-information) | | |
| **Do you agree to us emailing information about your health and treatment to the email address you have provided? (Yes or no)** |  | |
| **Research & Innovation** | | |
| We are a research practice and would like to occasionally let you know about opportunities to take part in research studies, service improvements or innovations that are relevant to your health. You will be able to choose whether or not to take part in each opportunity and your choices will not affect your NHS care. | | |
| **Do you agree to us contacting you occasionally about opportunities to contribute to research, service improvements and innovations relevant to your health? (Yes or no)** |  | |

**WHEN COMPLETE PLEASE EMAIL THIS FORM TO INFO.NBS@NHS.NET**

*By submitting this form you are agreeing to us processing and storing your personal information for the purposes of providing your healthcare, maintaining your healthcare records and the other lawful uses set out in our privacy statement. For our full privacy statement,* [see here](https://19beaumontstreet.co.uk/media/content/files/19BS-Privacy-policy-and-notice-vMay2020.pdf)*.*

*Please note when you download and complete the form your details may be saved to the computer you are working on. Whilst our nhs.net email addresses are secure, we cannot be responsible for the security of the email system you are using. If you have any concerns about sending your information by email, please use another method such as sending the form by post.*