

# How to register as a patient

Fill in this form. You can get the form from reception



**NHS** Family doctor services registration GMS1

*Please complete in BLOCK CAPITALS and tick  as appropriate*

**Patient's details**

Mr  Mrs  Miss  Ms Surname

Date of birth: ..... First names: .....

NHS No. .... Previous surname/s: .....

Male  Female Town and country of birth: .....

Home address: .....

Postcode: ..... Telephone number: .....

**Please help us trace your previous medical records by providing the following information**

Your previous address in UK: ..... Name of previous GP practice while at that address: .....

Address of previous GP practice: .....

**If you are from abroad**

Your first UK address where registered with a GP: .....

Hand the form into reception.



The receptionist will add you to the practice register.



Then you will be able to book appointments.

Date: .....

Time: .....