

## SIGN-UP FORM FOR WAITING-ROOM AND PATIENT FACING SERVICES

Please bring identification documents with you. Acceptable forms of ID are as follows:

**[Passport, Driving Licence, Marriage Certificate or Birth Certificate]**

Full Name	
DoB	
Address	
Postcode	
Home Phone	
Mobile Phone	
Email Address	

I confirm that the above details are correct:

Signed \_\_\_\_\_ Date \_\_\_\_\_

Received at practice by \_\_\_\_\_ Date \_\_\_\_\_

Patient needs to wait for verification email, then follow the link included.

### CHECK LIST FOR OFFICE USE ONLY

Data entered in PFS?

Record ID provided / Vouch information:

Email verification sent?

Activation codes sent?

Readcode #912P added?

Date completed:

By: