

To be completed by t	he docto	or				
Doctors Name				HA Coo	de	
☐ I have accepted this pati	ent for gene	eral medical services	the provis	ion of contracep	otive services	
☐ I have accepted this pati Doctors Name, if different fi		eral medical services on behalf of	the doctor	named below w		
☐ I am on the HA CHS lis	t and will r	provide Child Health Surveillan	ce to this	patient or		
I have accepted this pa	itient on be	ehalf of the doctor named bel	ow, who i		this practice and is on the	
HA CHS list and will pr Doctors Name, if different fi		Health Surveillance to this pa	tient.	HA Coo	40	
	***************************************	tes to this patient subject to H	ealth Aut	hority's Approv	val	
Distance in miles betw	een my pa	tient's home address and my n	nain surge	ery is		
		mation is correct and I claim the tement of Fees and Allowances. An au		Practice Stamp		
rail is available at the practice auditors appointed by the Au		tion by the HA's authorised office	rs and			
Authorised Signature	<i>Sit</i> 5.0111115.					
Name		Date//		1		
SUPPLEMENTARY QUESTI	ONS					
SVIEW TO BE WANTED BY THE WAY OF THE PARTY O	ENSTRUMENT OF THE PERSON NAMED IN COLUMN 1	ION for all patients who are	not ordi	narily residen	t in the UK	
THE RESERVE THE PARTY OF THE PA		GP practice and receive free med	the same of the same of the same	Original Control of the Control of t	AND THE RESERVE OF THE PARTY OF	
		ent' in the UK you may have to polarity				
		omic Area must also have the stat				
		f suspected infectious diseases an not ordinarily resident here are ex			The state of the s	
S S S S S S S S S S S S S S S S S S S		e, exemptions and paying for NHS				
you may be asked to provid			o NUC tros	atmont autolde e	of the CD amention otherwise	
		ntitlement in order to receive fre . Even if you have to pay for a se				
1175	7.0	ent, regardless of advance paym		unaabla status		
with NHS secondary care or	ganisations	will be used to assist in identifyin (e.g. hospitals) and NHS Digital, f	or the pur	poses of validat		
recovery. You may be conta Please tick one of the follow		alf of the NHS to confirm any de	tails you h	ave provided.		
	A CONTRACTOR OF THE PROPERTY O	pay for NHS treatment outside of	of the GP p	oractice		
b) I understand I have	a valid exen	nption from paying for NHS trea	tment out	tside of the GP p	practice. This includes for	
provide documents to suppo		nmigration Health Charge ("the n requested	surcharge	), when accom	panied by a valid visa. I can	
c) I do not know my cha	The state of the s					
action may be taken agains		this form is correct and complete	e. I unders	tand that if it is	not correct, appropriate	
	omplete the	form on behalf of a child under	16.			
Signed:			Date:		DD MM YY	
Print name:				nship to		
On behalf of:			patient			
Complete this section if y	ou live in a	nother EEA country, or have n	noved to	the UK to stud	y or retire, or if you live in	
		mber state. Do not complete t NCE CARD (EHIC), PROVISION		-		
DETAILS and S1 FORMS						
Do you have a non-UK EH	C or PRC?	YES: NO:	CONTRACTOR OF THE PROPERTY OF	s, please enter below:	details from your EHIC or	
		Country Code:				
		3: Name				
		4: Given Names				
If you are visiting from another EEA country and do not hold a current			DD MM Y	YYY		
		6: Personal Identification Number				
		7: Identification number				
EHIC (or Provisional Replacer Certificate (PRC))/S1, you ma	y be billed	of the institution				
for the cost of any treatment received outside of the GP practice, including		8: Identification number of the card				
at a hospital.	County	9: Expiry Date	Y MM dc	YYY		
PRC validity period	(a) From:	DD MM YYYY		(b) To	DD MM YYYY	
Please tick if you have a	an S1 (e.g. ) but work i	you are retiring to the UK or you another EEA member state).	u have be	een posted here	e by your employer for	
Particular Control Con		ised? By using your EHIC or PRO		and the same of th		
and GP appointment data cost recovery. Your clinical	will be sha data will n	red with NHS secondary care (hot be shared in the cost recover be shared with The Departme	ospitals) a ry process	and NHS Digita	I solely for the purposes of	
recovering your NHS costs			TOT WO	ik and rension	s for the purpose of	