

Blandford Medical Centre

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Blandford Patient Forum Group Consent to Contact Form

It is important for us to ensure we have a cross section of the practice population covering ethnic origins and demographics therefore we would appreciate you completing all the information below:

Name	
Address	
Telephone/Mobile	
e-mail	

Male		Female	
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Under 16 years	<input type="text"/>	55 – 64 years	<input type="text"/>
17-24 years	<input type="text"/>	65-74 years	<input type="text"/>
25-34 years	<input type="text"/>	75-84 years	<input type="text"/>
35-44 years	<input type="text"/>	Over 84 years	<input type="text"/>
45-54 years	<input type="text"/>		<input type="text"/>

A patient?	<input type="text"/>
A carer?	<input type="text"/>

White:

British Irish Any other

Mixed:

White and black Caribbean White and Black African

White and Asian Any other mixed background

Asian or Asian British:

Indian Pakistani Bangladeshi Any other Asian background

Black or black British:

Caribbean African Any other black background

Other ethnic groups:

Chinese Any other ethnic group

How would you like to receive information and be involved:

Virtual e-mail? Post Attend Patient meetings

Please return your completed form to the Practice Manager.

Your details will be treated in the strictest of confidence and will not be used in connection within any other services.