

## Capelfield Surgery

### CONSENT TO COMMUNICATE

Due to changes in the Data Protection Act relating to Privacy which came into force in May this year, the surgery now needs to gain your consent to communicate with you.

In order to ensure we can look after your health needs in a timely fashion we would appreciate being able to continue to communicate with you by letter, phone, text and e-mail.

Please therefore check the details below, amending any that are out of date or incorrect and indicate your consent by ticking the relevant boxes and signing this form.

**Patient's Name:**

**Patient's Address:**

**Patient's Mobile Number:**

**Patient's e-mail address:**

I **CONSENT** to the practice communicating with me

Signed:

Date:

#### FOR OFFICE USE

<b>Coded to Patient Record</b>		<b>Date</b>
Consent given to communicate	9ND	