**Friends of Elmhurst**

**Patient Participation Group**

If you would like to join our PPG you can email billwoodward@btinternet.com or chandra18@gmail.com

Alternatively you can complete the details below and we will pass them onto the group for you.

Name: …………………………………………………………..

 Email address: …………………………………………………………..

Tel No: …………………………………………………………..

Mobile No: …………………………………………………………..

Postcode: …………………………………………………………..

The information below will help to make sure that we receive feedback from a representative sample of the patients registered at this practice.

**Your Gender:** Male 🗌 Female 🗌

**Your Age:** Under 16 🗌 17 – 24 🗌

 25 – 34 🗌 35 – 44 🗌

 45 – 54 🗌 55 – 64 🗌

 65 – 74 🗌 75 – 84 🗌

 Over 84 🗌

**The ethnic background with which you most closely identify is:**

***White***British group 🗌 Irish 🗌

***Mixed***White & Black Caribbean🗌 White & Black African 🗌

 White 6 Asian 🗌

***Asian or Asian British*** Indian 🗌 Pakistani 🗌

 Bangladeshi 🗌

***Black or Black British*** Caribbean🗌 African 🗌

***Chinese or other***Chinese 🗌 Any other 🗌

**How would you describe how often you come to the practice?**

Regularly 🗌 Occasionally 🗌 Very Rarely 🗌

Thank you

The information you supply us will be used lawfully, in accordance with the Data Protection Act 1988. The Data Protection Act 1988gives you the right to know what information is held about you, and sets out rules to make sure that this information is handled properly.