

Haverfield Surgery

Patient Virtual Participation Group



Would you like to have your say about the services provided at Haverfield Surgery? We value your opinion and would like to encourage patients to give their views on how the practice is doing.

By providing your email address we can add you to a contact list. This means that we can get in touch with you occasionally via email to ask you to complete a short survey (once a year) which should take no more than 10 minutes, or a question regarding the practice.

Please complete the information below and return to the surgery.

Name:.....

Date of Birth:

Email Address:

Telephone:..... Mobile.....

Ethnicity:.....

Your contact details will only be used for this purpose and will be kept safely.

If at any time you would like to withdraw from this, please let us know and we will remove you from the group.