

BENTLEY VILLAGE SURGERY

Hole Lane
 Bentley
 Farnham
 GU10 5LP

Dr Jonathan Moore
 Dr Melanie Way
 Dr Abigail Evers



Telephone: 01420 22106
 Fax: 01420 520024

CHANGE OF ADDRESS/NAME FORM

PLEASE CHECK THAT THE NEW ADDRESS IS STILL WITHIN THE SURGERY BOUNDARIES

SURNAME.....**Mr/Mrs/Ms/Miss**

FIRST NAME(S).....

PREVIOUS SURNAME(S).....

DATE OF BIRTH..... **NHS no. (if known)**.....

ETHNICITY

White British	Other British	European mixed or Slavic	Black or White Caribbean	Black or White African
Chinese or Japanese	Asian	Indian or British Indian	Pakistani or British Pakistani	Bangladeshi or British Bangladeshi
Other	Other mixed background	Irish		

NEW ADDRESS	PREVIOUS ADDRESS
Post Code:	Post Code:
Name of Previous occupant if known:	
CONTACT NUMBERS	
Home:	Mobile:
Work:	Email:

OTHER FAMILY MEMBERS	
NAME	DATE OF BIRTH

DISPENSING PATIENT, if address greater than 1 mile from nearest Pharmacy Yes/No