

**THE MEDICAL CENTRE**  
41-45 ENDERLEY ROAD, HARROW WEALD, MIDDX , HA3 5HF  
Tel: 08444 127111

**NEW PATIENT REGISTRATION**

To register as a patient at Enderley Road, please bring this completed application form to the Medical Centre. You **MUST** produce one document from each of the 2 sections below confirming Residency and one confirming Entitlement to NHS Treatment.

Registrations will only be processed once documents have been checked by Reception Staff

**PERSONAL DETAILS**

Surname ..... Forenames .....  
Address ..... Date of Birth .....  
..... Home Telephone No .....  
Postcode ..... Work/Mobile No .....  
E-mail address .....

**FAMILY MEMBERS**

1. .... DOB..... 4..... DOB.....  
2..... DOB..... 5..... DOB.....  
3..... DOB..... 6..... DOB.....

**SECTION 1**

**You must provide ONE example from the list below as proof of Entitlement to NHS Treatment for each person over 16years of age you wish to register.**

Tick the relevant box

- Current Passport                       Medical Card/Birth Certificate - accompanied by Photo ID  
 Immigration Documents

**SECTION 2**

**You must provide ONE example from the list below as proof of address.**

Tick the relevant box (The items below must be dated within the last 3 months)

- Council Tax Bill/Letter/Payment Book  
 Council Housing Association Rent Book/Statement/Letter/Tenancy Agreement  
 Current Television Licence  
 Utility Bill (excluding mobile phone bills)  
 Bank/Building Society/ Credit Card Statement