**Lockstown Practice**

**Patient Participation Group (PPG) Membership Form**

We want our patients to be well informed about their GP practice.

We want to give you the opportunity to share your views about the services we deliver and to be kept up to date with changes at the practice.

**To help do this we would like members to join our Patient Participation Group (PPG) where we will engage in regular face to face meetings**

Sign up to our patient group and, from time to time we will meet in the practice, to ask for their feedback, participation in surveys, and review our practice newsletter along with invitations to events.

**Please complete the details below and pass to our reception team.**

* I would like attend face to face meetings and receive the practice newsletter and other updates by email
* I would like to participate in surveys and give my feedback to the practice
* I would like to receive information about events at the practice

Full Name:

Email address:

Home address:

**We always comply with data protection. We will only use your information to send you emails and will not pass it to anyone else**