



The Physiotherapy Centre (Waterlooville) Ltd
 96 London Road, Widley, Waterlooville, Hants, PO7 5AB
 Tel: 02392 215 050 Fax: 02392 342 198 Email: questions@thephysiocentre.co.uk

Consent Form

Mr/Mrs/Ms/Miss/Master/Dr etc.			Details Updated/Scanned (Office use only)	
First Name				
Surname				
Address Inc. postcode				
Date of Birth				
Home Telephone No.		Mobile No.		
Print Email Address				
GP/Consultant's Name & GP Surgery				
Where did you hear about us? (please circle one)	Word of mouth / Drive Past / Yellow Pages / Our Website / Google / Yell.com Insurance Company / GP / Consultant / Previous Attendance Other			

If an Insurance Co./Employer/Solicitor are funding your treatment, then please enter the details below

Organisation Name			
Address			
If appropriate Membership No.		Authorisation/Claim No.	
		No. of sessions authorised	

Please read the terms & conditions overleaf before completing this form

- Tick that you consent to a course of treatment with a clinician at The Physiotherapy Centre (Waterlooville) Ltd *
- Tick that you consent to The Physiotherapy Centre (Waterlooville) Ltd storing and using your data for the purposes as laid out in our Ts&Cs **

* We will confirm consent to treatment for each new condition or every 6 months, whichever is sooner.

** We will ask for confirmation of consent to retain and use your data at least every 6 months.

Our Terms & Conditions are overleaf. However more detailed information and policies regarding Personal Data are available at www.thephysiocentre.co.uk/terms

Please put your name, sign and date to confirm you agree to the Terms & Conditions.

Print your Name	
Signature	
Date	