

Tandragee Medical Centre

Change of personal details form

We value your assistance in keeping your details up to date on our system. If you get a new mobile number, or change your address please let us know.

Name _____ New Name _____

(please provide marriage certificate, change of name by deed pole as evidence)

Address _____ New Address _____

Post Code _____ New Post Code _____

(please provide change of address documents – utility bill, rental agreement, mortgage letter)

Land line tel. no _____ New Land line tel. no _____

Work tel. no _____ New tel. no _____

Mobile no. _____ New mobile no. _____

Email _____ New Email _____

Please bring this form to reception with the relevant proof of change of name / address as needed and we will update your record within 24 hours.

Thank you