

Practice profile

Title/name of practice	
Address	
Telephone number Fax number Email address	
No. of GPs	
Partners' names	
List size	
Location (A-Z reference) Parking available – Y/N	
Dates required and duties	See attached sheet
Appointments system in operation – Y/N	
Which computer system do you operate?	
Contact name at surgery	
Any special clinics?	