**QUEEN MARY PRACTICE**

**SOUTH WOODFORD**

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| Accessible Information and Communication Format Request FormThis Form is available in large print |
| Name |  |
| Address |  |
| Telephone |  |
| Date of Request |  |
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![C:\Users\kamaljeet.bhangra\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\B21AUR02\online-customers-share-information[1].jpg]()**DO WE MAKE OURSELVES CLEAR**

**Request for Information in an alternative format:**

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| Please select the format you require below |
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Please complete in full and hand in to reception so we can make sure you have access to information you understand