



## Free Prescription Collection & Ordering Service

***Pearn's Pharmacies Ltd will take your prescription order form to your surgery and collect prescriptions for you. You can then either collect it from the pharmacy or have it delivered***

To get this **FREE** service, simply fill in this form and hand it in to/fax to your usual branch of Pearn's Pharmacies Ltd and we'll do the rest.

Name:	_____
Address:	_____ _____
DOB:	_____
Postcode:	_____
Telephone:	_____
E-mail: (optional)	_____
NHS No:	_____

Doctor's Name:	_____
Surgery Name:	_____
Deliver:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Signed:	_____
Date:	_____

Dear Dr:	_____
I	_____
Of	_____
give permission for <b>Pearn's Pharmacies Ltd</b> to order and/or receive my prescriptions from the surgery, either by collecting for me, by post or by electronic transfer. I'll inform you if I want to change this arrangement.	
Signed:	_____
Date:	_____
DOB:	_____
NHS No:	_____