**Safeguarding LIS 2022/23 – Manual sign-up form**

**Date Completed:**

**Practice details**

|  |  |  |
| --- | --- | --- |
| **Borough (Delete as appropriate):**  Barking & Dagenham  City & Hackney  Havering  Newham  Redbridge  Tower Hamlets  Waltham Forest | **Practice Code (Please enter you F or Y code):** | **Practice Name:** |
| **Please confirm that you have read and agree to participate in the NEL Safeguarding LIS: YES / NO** | | |
| **Name of person completing sign up:** | | |
| **Position of person completing sign up:** | | |
| **Email address:** | | |

**Please return to – North East London Primary Care Team:**

[**nelondon.nel-primarycare@nhs.net**](mailto:nelondon.nelprimarycare@nhs.net)