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

**Date Completed:**

**Practice details**

|  |  |  |
| --- | --- | --- |
| **Borough (Delete as appropriate):** Barking & DagenhamCity & HackneyHaveringNewhamRedbridgeTower HamletsWaltham 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**