

Health 365 – Patient Portal Registration Form

You must complete this form and provide photo proof of identity in order to register yourself with the patient portal with Peninsula Medical Centre.

Each applicant must complete their own form and register with a unique email address. Children can be linked to their parent/guardian (see below).

Once you have registered you will receive a confirmation email with your username and temporary password.

The Health 365 'User Guide for Patients' will instruct you how to use Health 365.

Full Name: _____

Date of Birth: _____

Address: _____

Email: _____

Contact Phone: _____

I am registering myself on the portal and/or children under 16 years of age who are legally in my care.

Signed: _____ Date: ____/____/____

Name(s) & Date of Birth of child(ren) _____

Please note: It is a condition of use that patients using the portal services have no outstanding invoices. Portal services may be removed if your account becomes overdue.

Practice Use Only

Staff Initial: _____

Patient NHI Number(s): _____

Photo ID Sighted:

Passport

Drivers Licence

Personally Known