To register your interest in being part of the **Support for General Practice focus groups**,

please complete the form below and return to [info@gpmplus.co.uk](mailto:info@gpmplus.co.uk) by 26 August

|  |  |
| --- | --- |
| Name |  |
| Practice (or Locum) |  |
| Place |  |
| Role |  |
| Email address |  |
| Phone number |  |

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