



Keeping In Touch

Respite
Rehabilitation
Reassurance

Harold's Cross
Blackrock
Wicklow



Postage will be paid by Licensee

No
Postage
Stamp
Required

Patient Services Department
Our Lady's Hospice & Care Services
Harold's Cross
Freepost F5185
Dublin 6W
D6W RY72



Respite Harold's Cross
Rehabilitation Blackrock
Reassurance Wicklow

Data Protection

Under data protection law we require consent from persons of first contact/families/carers/important others so that we can contact you about our services.

What does this mean?

We would like to be able to contact you directly about services such as memorial events, counselling, quality and satisfaction surveys or research, which help us to keep improving what we do.

If you do not fill out this form we will not be allowed to make contact with you regarding our services.

Keep in Touch

If you are happy for us to keep in touch, we will be allowed to contact you for valuable feedback on our work and to share details of services you may find helpful.

What do I do next?

Please complete the details below and hand this form in to the Patient Services Department or ward reception. Alternatively, you can fold it in two and send it back to us by freepost.

You might like to tell other family members/carers that we will not be permitted to contact them unless they fill out this form.

Thank you for your understanding.

To find out more about data protection, the laws & your rights please visit www.dataprotection.ie

I, (please print name in block capitals) _____

am the person of first contact/family member/important other of (please print patient's name and your relationship to patient) _____

Please print patient's address _____

Please give patient's date of birth _____

Please enter the contact details that you are happy for Our Lady's Hospice & Care Services to use.

My address is	
My telephone number is	
My mobile number is	
My email address is	

May we also contact you to tell you about our upcoming fundraising campaigns using these details? **Yes** **No**

Signed _____ Date _____

Thank you.

If you have any questions please contact the Data Protection Officer, Our Lady's Hospice & Care Services, Harold's Cross, D6W RY72.

Find us on     Visit: olh.ie

Please fold this form in two. There is glue on all three sides so you can seal it securely. You can post it to us for free or hand it in to the Patient Services Department or ward reception. Thank you.