


## Information Sharing Agreement

### SUMMARY OF ENDORSEMENTS – SIGNATURE/CONFIRMATION SHEET

#### Coordinate My Care

The parties to the agreement are as follows:

<b>Organisation:</b>	The Royal Marsden NHS Foundation Trust
<b>NHS Org. Code:</b>	RPY
<b>Address:</b>	203 Fulham Road, London SW3 6JJ
<b>Signature:</b>	
<b>Name:</b>	Dr Nicholas van As
<b>Designation:</b>	Medical Director & Caldicott Guardian
<b>Date:</b>	17/10/2018

<b>Organisation or Organisations covered by this signature, with addresses, and showing NHS Org. Code(s) where relevant:</b> (please print)	
<b>Signature or, if submitting electronically, 'Please accept this as formal confirmation':</b>	
<b>Name:</b> (please print)	
<b>Telephone:</b>	
<b>Email:</b> (please print)	
<b>Designation:</b>	Caldicott Guardian
<b>Date:</b>	

An up to date list of participating organisations may be obtained from the Coordinate My Care Team upon request.