

**FOUNTAINS HEALTH BUILDING**  
**STUDENT REGISTRATION FORM**

**SURNAME:** \_\_\_\_\_ **FORENAME(S):** \_\_\_\_\_

**NHS NO (if known):** \_\_\_\_\_ **DOB:** \_\_\_ / \_\_\_ / \_\_\_

**GENDER:** MALE/FEMALE **MOBILE NO** \_\_\_\_\_

**PLACE OF BIRTH:** \_\_\_\_\_ **EMAIL ADDRESS:** \_\_\_\_\_

**PARENTS NAME:** \_\_\_\_\_ **PARENTS TEL NO:** \_\_\_\_\_

**FOR INTERNATIONAL STUDENTS ONLY - DATE ENTERED UK:** \_\_\_/\_\_\_/\_\_\_



**COUNTRY ARRIVED FROM:** \_\_\_\_\_

**UNIVERSITY ACCOMODATION ADDRESS (WHERE YOU ARE LIVING IN CHESTER):**



\_\_\_\_\_  
\_\_\_\_\_

**POSTCODE:** \_\_\_\_\_

**HOME ADDRESS:**



\_\_\_\_\_  
\_\_\_\_\_

**POSTCODE:** \_\_\_\_\_

**PREVIOUS GP:** \_\_\_\_\_



**ADDRESS:** \_\_\_\_\_

**PATIENT SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_/\_\_\_/\_\_\_

**SMOKING STATUS:** \_\_\_\_\_ If Smoker, per day: \_\_\_\_\_



**ALCOHOL INTAKE:** \_\_\_\_\_ UNITS P/WK



**ANY ALLERGIES:** \_\_\_\_\_

**HEIGHT:** \_\_\_ ft \_\_\_ ins **WEIGHT:** \_\_\_ st \_\_\_ lbs

**ETHNIC ORIGIN:** \_\_\_\_\_



**MAIN SPOKEN LANGUAGE:** \_\_\_\_\_



**Fast Alcohol Screening Test (FAST) – please circle your answers**

Questions	Scoring System					Your Score
	0	1	2	3	4	
How often do you have 8 (for men) 6 (for women) or more alcoholic drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
<b>Only answer the following questions if your score above is 2 or more</b>						
How often in the last year have you not been able to remember what happened when drinking the night before?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often in the last year have you failed to do what was expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
Has a relative/friend/doctor/health worker been concerned about your drinking or advised you to cut down?	No		Yes, but not in the last year		Yes, during the last year	

**Scoring:** A total of 3+ indicates hazardous or harmful drinking

<p><b>1.5 units</b></p>  <p>Small glass red/white/rosé wine (125ml, ABV 12%)</p>	<p><b>2.1 units</b></p>  <p>Standard glass red/white/rosé wine (175ml, ABV 12%)</p>
<p><b>3 units</b></p>  <p>Large glass red/white/rosé wine (250ml, ABV 12%)</p>	<p><b>2 units</b></p>  <p>Pint of lower-strength lager/beer/cider (ABV 3.6%)</p>
<p><b>3 units</b></p>  <p>Pint of higher-strength lager/beer/cider (ABV 5.2%)</p>	<p><b>1.7 units</b></p>  <p>Bottle of lager/beer/cider (330ml, ABV 5%)</p>
<p><b>2 units</b></p>  <p>Can of lager/beer/cider (440ml, ABV 4.5%)</p>	<p><b>1.5 units</b></p>  <p>Alcopop (275ml, ABV 5.5%)</p>
<p><b>1 unit</b></p>  <p>Single small shot of spirits* (25ml, ABV 40%)</p>	

**Women:** should not regularly\* drink more than 2 to 3 units of alcohol a day. That's no more than a standard 175ml glass of wine (ABV 13%)

**Men:** should not regularly\* drink more than 3 to 4 units of alcohol a day. That's not much more than a pint of strong lager, beer or cider (ABV 5.2%)

\* "Regularly" means drinking this amount most days or every day. ABV is the percentage of alcohol in the drink.