



# ITP Support Association

## Hospital order form (UK only)

**PLEASE NOTE:** We can only supply single copies of titles  
We do not have the resources to supply our publications for hospitals to pass on to patients.

Name (\* Dr/Mr/Mrs/Ms) \_\_\_\_\_ (\*delete as appropriate)

Hospital \_\_\_\_\_ Department \_\_\_\_\_

Full postal address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode \_\_\_\_\_ Email address: \_\_\_\_\_

Title Required	Tick
<i>Patient leaflet</i> – this be downloaded directly from: <a href="http://www.itpsupport.org.uk/docs/itppatientleaflet.pdf">www.itpsupport.org.uk/docs/itppatientleaflet.pdf</a>	
<i>Know About ITP</i>	
<i>The Platelet (quarterly journal)</i>	
<i>Treatment table</i>	
<i>ITP Support Association poster</i>	

I enclose a donation of £ \_\_\_\_\_  
(we are always grateful for donations to help continue our work and fund ITP research)

**Please complete this form and send to:**

**The ITP Support Association,  
The Platelet Mission  
Kimbolton Road,  
Bolnhurst,  
Beds MK44 2EL**

Signature \_\_\_\_\_