

Flu Shots at South High School on Wednesday October 19th in the Nationwide Children's Clinic

Would you like your student to receive their flu vaccine at school? Return this form to the Nationwide Children's Clinic by Monday October 17th for the chance to win a raffle!

YES! AT SCHOOL I would like my student to receive their flu shot.

All parents/guardians will receive a call for additional consent prior to any student receiving vaccines.

NO! My student will receive vaccines from our family doctor or another location of my choice.

UNSURE I am unsure and/or do not want my student to receive any vaccines at this time.

Student's Name _____

Student's Birthdate _____

Parent/Guardian's Name (Print) _____

Parent/Guardian Signature _____

Parent/Guardian Phone # _____



**NATIONWIDE
CHILDREN'S**

When your child needs a hospital, everything matters.