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Footprints in the Sand Daycare



***Influenza Vaccination Request***

Date: \_\_\_\_\_

SUBJECT: ***Influenza Vaccination Request***

Name: \_\_\_\_\_

It is required that children receive all vaccinations per the schedule stipulated by State Regulations. Please include your child’s vaccination records with the Health Assessment form.

It is required that children attending Child care receive the Influenza Vaccination annually along with any recommended/required vaccinations, and records are provided to Footprints in the Sand Daycare.

*If you choose to not administer an Influenza Vaccination for your child, please fill in the bottom with:*

*Your child’s name.*

*Your name and*

*Reason for not administering.*

*All must be **hand written.***

*Return the bottom of this form.*

Please feel free to contact us if you have any questions or concerns.

Sincerely,

*Kim Schalk*

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