



Pomperaug District Department of Health

Consent for Administering Flu Vaccine When Children Are Accompanied by Persons Other Than Parent

The Pomperaug District Department of Health will not administer flu vaccine to children under the age of 18 unless they are accompanied by a parent/legal guardian or a caregiver with the following permission letter.

Note to parents from the Pomperaug District Department of Health:

- Please complete one form per child
- Caregiver must be 18 years or older.
- Consent forms are available at www.pddh.org. We would prefer that parents fill out and sign the consent form and have the caregiver bring it to the clinic along with this form.
- Caregiver must present the child's insurance card. A copy would also be acceptable.

Please PRINT LEGIBLY

To Pomperaug District Department of Health:

I, _____, give permission for _____

Name of parent Name of caregiver

to bring my child _____ for a flu vaccination at the PDDH flu
Name of child to receive flu vaccine
 vaccination clinic.

I wish my child to receive the following flu vaccination (you must select one):

Injectable (Quadrivalent Flu Shot) **FluMist (Nasal Spray Vaccine)**

Age of child: _____ **Weight** (if child is under 10 years): _____

If child is 6 months to 8 years: Has your child received at least 2 doses of flu vaccine prior to July 1, 2021? (This can be any combination of injectable or nasal spray flu vaccine.)

YES **NO**

I can be reached at this phone number at the time of the clinic: _____
Phone number

I have read the Vaccine Information Statement (VIS 8/6/2021) (available online at www.pddh.org) about seasonal influenza and the influenza vaccine. I have had a chance to ask questions and I understand the benefits and the risks of the influenza vaccine. I request that the vaccine be given to my child.

 Parent's Signature

 Date