



Save Yourself a Trip!

The School Based Health Center is offering Flu Vaccines to Newtown Middle School students only!

Appointments are scheduled during the school day

Here's what to Do:

1. Register your child with the School Based Health Center by filling out the SBHC Intake forms and Permission and Medical History form.
2. Read the Influenza-Flu Vaccine Information Statement-(VIS).
3. Answer the screening questions for contraindications to receiving the flu vaccine and sign the flu consent form, giving permission for your child to receive the vaccine at the School Based Health Center.
4. Return the forms to the Newtown Middle School, School Based Health Center via email to Nancy: kettner@CT-Institute.org or give them to your child to drop off at the SBHC.

Please check with your insurance company if a co-pay applies to the flu vaccine.

Call the SBHC with any questions: (203)270-6114 or email Nancy at the address above.



Newtown Middle School
School Based Health Center
"Healthy Kids Make Better Learners"

Patient Name:
Form completed by:

Date of Birth:
Relationship to child:

Information to Determine if Your Child Should Receive the Flu Vaccine

Table with 3 columns: Question, NO, YES. Rows include: Does your child have a problem eating eggs or a known egg allergy? Does your child have an allergy to gentamicin, neomycin, polymixin or gelatin? Did your child have a serious reaction to a flu vaccine in the past? Did your child have Guillain-Barre Syndrome (a type of temporary severe muscle weakness) within 6 weeks after receiving a flu vaccine?

I have read and understand the Influenza (Flu) Vaccine Information Statement (VIS) and consent to the administration of this vaccine to my child (Child's Name).

Parent/Guardian Signature: Date:

*****Office

Use Only:
Form reviewed by: Date: