  **Immunization Form**

**ForRegistrants of Child Care Centres**

Dear Parent or Guardian:

Under the Child Care and Early Years Act, Section 35 (1) of O. Reg. 137/2015 all children who attend a child care centremust be immunized according to Ontario's Publicly Funded Immunization Schedule.

**Don't have updated immunization records?**

* See your doctor for updated immunization records or missed vaccines
* Each time your child receives a vaccine, give acopy of that information toyourChild CareCentre
* No Health Card? Call 416-392-1250for locations whereyourchild canreceive free vaccination
* Always keep acopyof your child’s immunization record for your reference

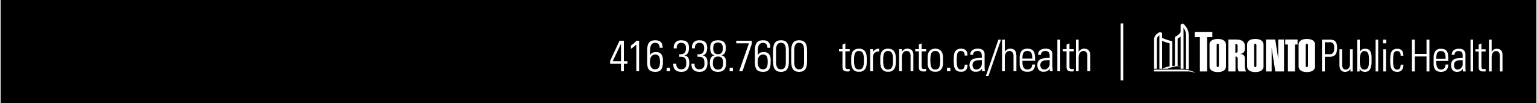
**Exemptions:**

If an exemption is required, please speak to your child care centre staff

For more information, call Toronto Public Health; Immunization Information Centre at 416-392-1250

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| Name of Child Care Centre |  | | | | | |
| Child's Name |  |  | | |  | |
|  | LAST NAME | MIDDLE NAME | | | FIRST NAME | |
| Date of Birth |  |  | | |  | |
|  | (year/month/day) |  | | |  | |
| Home Address |  | | | | | |
|  | NUMBER STREET NAME UNIT# CITY POSTAL CODE | | | | | |
| Parent/Guardian Name |  | | | | | |
|  | LAST NAME | | | FIRST NAME | | |
| Telephone Number |  | | | | | |
|  | HOME | | | BUSINESS | | |
| Doctor's Name |  | | Telephone Number: | | |  |

**Please attach a photocopy of your child's immunization record and return it to the Child Care Centre.**

Personal health information on this form is collected under the authority of the Health Protection and Promotion Act, R.S.O. 1990, c.h.7. It is used to administer the Toronto Public Health Vaccine Preventable Diseases Program, including maintaining immunization records for Child Care Centres. The confidentiality of this information is protected. For more information, visit our Privacy Statement at [tph.to/personalhealthinfo](http://www.tph.to/personalhealthinfo) or contact Manager, Vaccine Preventable Diseases – 235 Danforth Ave., 2nd floor or by telephone at 416-392-1250.