

Fluenz booking form

If you would like an appointment at a community immunisation clinic during October half term for your child to receive the fluenz nasal spray, please complete the following form and identify your preferred clinic. Please return completed forms to wcnt.immunisation@nhs.net

Child's Name	
Child's DOB	
Child's School	
Parents Contact Number	
Parent's Email	

Date	Venue	Time	Preferred clinic (please X)
Monday 23 rd October 23	Crewe	Afternoon	
Wednesday 25 th October 23	Middlewich	Afternoon	
Thursday 26 th October 23	Macclesfield	Morning & Afternoon	
Friday 27 th October 23	Wilmslow	Morning & Afternoon	

The immunisation team will be in touch once we have checked your child's details.

If we require you to complete a consent form we will e mail you the link.

Kind Regards

Cheshire East School Aged Immunisation Team