



CTU-0248



SCHOOL VACCINATION 7TH GRADE CONSENT FORM FOR PARENTS / GUARDIANS

SECTION A – IDENTIFICATION OF CHILD

Last name : _____ First name : _____

Date of birth (yyyy/mm/dd) : _____ Gender : M F

Names of parents or guardian

Mother : _____ Father : _____

Guardian : _____

SECTION B – CHILD'S MEDICAL AND VACCINATION HISTORY

1 - Has your child ever had a serious allergic reaction that required emergency medical care? YES NO I DON'T KNOW

2 - Does your child have immune-system problems due to a disease (e.g. leukemia) or medication (e.g. chemotherapy)? YES NO I DON'T KNOW

SECTION C – CONSENT

RETURN THIS SIGNED FORM WHETHER OR NOT YOU CONSENT TO VACCINATION

For children under the age of 14, the parent or legal guardian must give their consent if they want their child to receive the proposed vaccines. Children over the age of 14 can consent to vaccination themselves. As a parent or legal guardian, however, you remain an important figure to accompany your child in his decision-making.

Explanations to help you make an informed decision are provided in the booklet attached to this form. If you would like additional information about vaccination programs, please contact your local CLSC or speak with the school nurse. When you give your consent, it applies to the entire vaccination series.

DIPHTHERIA AND TETANUS
Do you **accept** or **refuse** to allow your child to get the vaccine (dT adsorbed or its equivalent) against these diseases? I ACCEPT I REFUSE

MENINGOCOCCAL SEROGROUPS A, C, W et Y
Do you **accept** or **refuse** to allow your child to get the vaccine (Nimenrix or its equivalent) against these diseases? I ACCEPT I REFUSE

HÉPATITIS B – 2^E DOSE
Do you **accept** or **refuse** to allow your child to get the vaccine (Engerix-B or its equivalent) against these diseases? I ACCEPT I REFUSE

OTHER RECOMMENDED VACCINE(S) ACCORDING TO YOUR CHILD'S VACCINATION STATUS

Vaccine against: _____ Vaccine name: _____ I ACCEPT I REFUSE

Signature of Mother, Father of Guardian

Date (yyyy/mm/dd)

Relationship (Mother, Father or Guardian)

