

Student Information

- Please attach a copy of your child's immunization record
- Parent to complete the following form at the time of school registration, and return to the school to forward to the health unit

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| Child's Legal Surname | Other Surnames (if any) |
| Legal First Name | Preferred Name |
| Date of Birth yyyy / mm / dd <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Other | Ontario Health Card Number |
| Legal Parent / Guardian | Legal Parent / Guardian |
| Preferred Mailing Address | Alternate Mailing Address |
| City | City |
| Postal Code | Postal Code |
| Preferred Phone _____ (circle one) Home Cell Work | Preferred Phone _____ (circle one) Home Cell Work |
| Alternate _____ (circle one) Home Cell Work | Alternate _____ (circle one) Home Cell Work |
| School that child is or will be attending | |
| Previous School (please indicate name of the school) | |

When your child receives their next immunization(s), please call the health unit or complete the secure electronic form on our website at www.simcoemuskokahealth.org/immsonline to update their immunization record in our database. Immunization records and updates are NOT automatically provided by your doctor.

The Simcoe Muskoka District Health Unit is required under the *Immunization of School Pupil's Act* (ISPA) to collect and maintain up-to-date records of immunization for every child registered in school. **The ISPA states that parents are required to provide the health unit with proof of completed immunization for measles, mumps, rubella, tetanus, diphtheria, pertussis (whooping cough), polio, varicella (chickenpox) and meningitis.**

***Note: Chickenpox vaccine is required beginning with children born in 2010 and later**

If a parent chooses not to immunize their child, they must complete either a Statement of Medical Exemption (Form 1) or Statement of Conscience or Religious Belief Affidavit (Form 2). Please contact the health unit for more information.

This information is collected under the authority of the *Health Protection and Promotion Act R.S.O 1990 c.H.7., s.4* and the *Immunization of School Pupil's Act*. The personal health information collected on this form will be used to maintain immunization records and to monitor the use of vaccines for public health purposes. Questions regarding the collection and use of personal health information should be directed to the Office of the Privacy Officer, Simcoe Muskoka District Health Unit, 15 Sperling Drive, Barrie ON L4M 6K9, 705-721-7520 or 1-877-721-7520.