

決 裁	課長	係長	担当者

決裁終了後、以下のとおりに交付する。

## Vaccination ticket (Issuance・Reissue) Application form

Date \_\_\_\_\_

大崎上島町長 様

If you have not received the vaccine you are getting a ticket for, please write the name of the vaccination and sign your name.

Applicant Address

Phone number \_\_\_\_\_

Name (Guardian's name) \_\_\_\_\_

※ Children 15 or younger should have their parent or guardian sign.

1.Vaccination ticket user name			
2.Vaccination ticket user date of birth			
3.Guardian's name		Name	Relationship
4.Vaccination ticket user address			
5.Reason for issue		New・Change in address・Lost・Damaged・Other ( )	
6.Type of vaccination you wish to receive	BCG	tickets	Japanese Encephalitis(New vaccine) 1st term first time First tickets
	Diphtheria, Pertussis, Tetanus , Polio 1st term first time First	tickets	Japanese Encephalitis(New vaccine) 1st term first time Second tickets
	Diphtheria, Pertussis, Tetanus , Polio 1st term first time Second	tickets	Japanese Encephalitis(New vaccine) 1st term first time addition tickets
	Diphtheria, Pertussis, Tetanus , Polio 1st term first time Third	tickets	Japanese Encephalitis(New vaccine) Second term tickets
	Diphtheria, Pertussis, Tetanus , Polio 1st term added	tickets	Varicella First tickets
	Diphtheria, Pertussis, Tetanus Second term (Two kinds of mixture)	tickets	Varicella Second tickets
	Hib vaccine First	tickets	Viral Hepatitis type B First tickets
	Hib vaccine Second	tickets	Viral Hepatitis type B Second tickets
	Hib vaccine Third	tickets	Viral Hepatitis type B Third tickets
	Hib vaccine Fourth time	tickets	Human Papilloma Virus(HPV) First (2・4-valent)or(9-valent) tickets
	Streptococcus pneumoniae First	tickets	Human Papilloma Virus(HPV) Second (2・4-valent)or(9-valent) tickets
	Streptococcus pneumoniae Second	tickets	Human Papilloma Virus(HPV) Third (2・4-valent)or(9-valent) tickets
	Streptococcus pneumoniae Third	tickets	RotaTeq First tickets
	Streptococcus pneumoniae Fourth time	tickets	RotaTeq Second tickets
	Measles, Rubella mixture First term	tickets	RotaTeq Third tickets
Measles, Rubella mixture Second term	tickets	Rotarix First tickets	
	tickets	Rotarix Second tickets	

※ Required documents : A copy of the Maternal and Child Health Handbook showing vaccination history

Do not fill in this field  
 ID番号(073 )より(073 )に変更 PC( )  
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