

UPCOMING CLINICS

FLU/TDAP:

I would like to receive the following information/ forms for the Flu/Tdap Clinic to be held on November 2, 2011 at 8:00 am at Sanborn Central.

_____ Tdap _____ # of forms needed
_____ Influenza Nasal Spray _____ # of forms needed
_____ Influenza Injectable _____ # of forms needed

By checking one of the above and listing your family name on the bottom, the appropriate forms will be sent to your family.

I understand that these forms must be completed and returned no later than 8:00 am November 1, 2011.

Dental:

Information regarding the upcoming dental clinic will be sent home with elementary students on Monday, October 24th. Middle School and High School students may pick up the information in the office.

_____ Please make sure that my family receives this information.

(By checking this I will make sure that you receive the information regarding the Dental Clinic)

Family: _____

PLEASE RETURN THIS SHEET BY OCTOBER 26, 2011