



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 . Please ensure you have completed a consent form on line before returning this booking form. Once your child's details have been checked the Imms Team will email you an appointment.

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	FULL
Wednesday 25 th October 23	Middlewich	Afternoon	
Thursday 26 th October 23	Macclesfield	Morning & Afternoon	
Friday 27 th October 23	Wilmslow	Morning & Afternoon	

If you have already completed a consent form, you DO NOT need to do another.

If you have not yet completed a consent form, please do so by using the following link: -

www.wchcimms.co.uk/Forms/Flu

The code for your school is WC146387

Kind Regards

Cheshire East School Aged Immunisation Team