

Please download and complete this form and hand it in at the Surgery as soon as possible before departure. Please ring the surgery 2 weeks after handing in your form to find out if vaccinations are recommended, and if so to make an appointment with the nurse. Last minute travellers, please be aware that whilst we will make every effort to accommodate your needs, appointment times may be very limited.

NB. – Some vaccinations take 4weeks to complete the course.

Name: _____ DOB: _____
 Contact Te No(s): _____

Date of Departure: _____

Please list each country to visited, including cruises and specify length of time to be spent in each country.

<u>COUNTRIES TO BE VISITED</u>	<u>AREAS TO BE VISITED</u>	<u>LENGTH OF STAY</u>

ACCOMMODATION: Please tick any that apply.

Hotel____ Hotel____ Hostel____ Family home____ Camping____ Other____ Please specify.

High risk activities – please give details

MEDICAL INFORMATION

Steroids Y/N	Oral Contraception Y/N	Pregnant Y/N	Planning a pregnancy prior to departure? Y/N	Allergies Y/N
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If you have answered yes to Allergies please specify; _____

<u>Please list any current medical problems</u>	<u>Please list any current medication</u>

I confirm my answers to the above questions and request vaccination and malaria advice. I understand that an administration fee of will be charged currently £12 per person or £25 per family. Some vaccinations are not available under the NHS and can only be provided on a private basis. Payment for such vaccinations will be required at the 1st appointment.

Signed _____ Date _____

(Parent/Guardian if under 16)

For surgery use only: Date received _____ By whom _____