

Dear Parent or Guardian:

The Indiana State Department of Health and the Indiana Department of Education have mandated that all schools enter immunization data on the CHIRP (Children and Hoosiers Immunization Registry Program) web site. CHIRP is an internet-based immunization program of the Indiana State Department of Health. This information may be used to verify that your child has received proper immunizations.

A consent form must be signed before immunizations are entered into CHIRP by the school nurse. This form is to be filled out only once. Please complete the attached form and return it to your child's school.

Thank you for your time and cooperation.

LAKE CENTRAL SCHOOL CORPORATION

I _____, give _____

Name of School

permission to release the following information concerning my child: _____

Child's Name

to the Indiana State Department of Health's Children and Hoosiers Immunization Registry Program (CHIRP):

The following information will be released:

Name, Date of Birth, Race, Address, City, State, Zip Code, County, Home Phone Number,

School that they are presently attending and Immunization Data

I understand that the information in the registry may be used to verify that my child has received proper immunizations and to inform me or my child of my child's immunization status or that an immunization is due according to recommended immunization schedules.

I understand that my child's information may be available to the immunization data registry of another state, a healthcare provider or a provider's designee, a local health department, an elementary or secondary school,

a child care center, the office of Medicaid policy and planning or a contractor of the office of Medicaid policy and planning, a licensed child placing agency, and a college or university. I also understand that other entities may be added to this list through amendment to I.C. 16-38-5-3.

I hereby consent to the release of such information.

Signature

Date

Printed Name of Parent or Guardian

Address

Telephone Number

Child's Name

Date of Birth

School

Grade