

How to complete the vaccination record/ health registry: You may photocopy the pages from your registry and attach them to the form or use them as a guide to find the information.

- I. Child's last and first name, sex and date of birth.
- II. Vaccination record: name of the vaccine and date administered.
- III. Health information: Has the child suffered from...? Measles yes/no; Chicken pox yes/no; Ancine yes/no; Rheumatism yes/no; Scarlatine yes/no; Coqueluche yes/no; Otitis yes/no; Orellons yes/no; Asthma yes/no

Mention any other health complication with date.

- IV. Recommendations from the parents/custodians:

Is the child under treatment? if the answer is yes, please write the name of the medicine and attach the medical prescription.

Does the child wet the bed at night? Yes/no occasionally. If the child is a girl, did she have her first menstruation? Yes/no

- V. Information about the custodian: last name, first name address, home telephone number and work number, date and signature.

The rest of the information is for the organizer of the sojourn.