

Influenza Vaccine Order Form 2008

PLEASE FAX THIS ORDER FORM TO: 1800 041 528

VACCINE ACCOUNT NUMBER

PRACTICE/ORGANISATION NAME

DELIVERY ADDRESS

POSTCODE

TELEPHONE FACSIMILE

PRACTICE/ORGANISATION OPENING HOURS DATE / /

AUTHORISED BY (Print Name) SIGNATURE

Free INFLUENZA Vaccine for the following groups ONLY:

- all Australians aged 65 years and over.
- all Aboriginal or Torres Strait Islanders 50 years & older; and
- Aboriginal or Torres Strait Islanders 15 – 49 years at increased risk due to chronic illness.

VACCINE	No. to be supplied
Influenza	

- Acquittal forms will be mailed to all practices in September 2008

Enquiries regarding orders/despatch to NSW Vaccine Centre: 1300 656 132