



INDIANA UNIVERSITY SOUTH BEND
HEALTH AND WELLNESS CENTER

*Influenza (“Flu”) is a contagious disease that spreads around the United States every year, usually between October and May. Flu is caused by influenza viruses, and is spread mainly by coughing, sneezing, and close contact (including touching contaminated surfaces).

- * Some people should NOT get this vaccine if:
 - Severe, life-threatening allergies occur after receiving a dose of flu vaccine
 - Prior history of Guillian-Barre Syndrome
- If you are pregnant, please consult with your physician prior to being vaccinated.
- If you are allergic to eggs, please consult with your physician prior to being vaccinated.
- You are required to notify us if you are not feeling well at this time
- It should be noted that influenza vaccine contains noninfectious killed viruses and CANNOT cause influenza or coincidental respiratory disease.

I have read and understand the above information. I am voluntarily consenting to be immunized against influenza.

Print Name _____ DOB: _____
 Address: _____ Phone number: _____

Email: _____

List any known allergies: _____

Emergency Contact: _____ Relationship: _____
 Phone number: _____

Signature _____ Date: _____

Employee/Benefits _____ Anthem ID# IUCAN _____

Employee/Without _____

Student _____ University ID# _____

Community _____

Method of payment (Circle one): Bursar, Credit, Cash, Check, or Insurance

Amount: _____

Verified/ Given By _____ Left/Right Deltoid
 Flulaval Quadrivalent Vaccine Lot: _____ Expiration: _____