Please read our travel leaflet and look at your vaccination history printout. If all your vaccination history is not on the printout you will need to contact your previous surgery for any missing information. Please complete this form and either **email back** to the Family practice at [bnssg.thefamilypractice@nhs.net](mailto:bnssg.thefamilypractice@nhs.net) or **hand it in to reception**. A nurse will look at it and send you a text advising whether you need to book in or not.

NAME:

ADDRESS:

DATE OF BIRTH:

TELEPHONE NUMBERS: **Are you happy to be texted? YES/NO**

**COUNTRIES TO BE VISITED INCLUDING STOPOVERS:**

DATES OF TRAVEL:

TYPE OF TRAVEL/ACCOMMODATION:

**PREVIOUS IMMUNISATIONS:**

Hepatitis A

Typhoid

Tetanus/Diphtheria/Polio

Any Meningitis

MMR

**PLEASE ANSWER THE FOLLOWING QUESTIONS: YES/NO**

Do you have any allergies, including egg?

Have you had any vaccinations in the last four weeks?

Have you had any problems with previous vaccinations?

Are you on steroids or having chemotherapy?

Could you be pregnant, or are you trying to conceive?