

## School Information

Name of School	
Contact Person	
Phone Number	
Back Up Contact	
Back Up Contact Number	
# of Staff/Nurses at each location	
# Students	
# To be vaccinated	
Clinic Location	
Clinic Hours	
Tables Provided?	
Trash Cans Available?	
Extension Cords Available?	
Chairs Available?	

**Please fax or email information to Lori Smyth**

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