

**IMMUNIZATION HISTORY FOR NEW STUDENT REGISTRATION**

STUDENT'S LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

OTHER LAST NAMES USED \_\_\_\_\_

BIRTH DATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
YYYY / MM / DD

☐ MALE ☐ FEMALE ☐ OTHER

SCHOOL TO ATTEND \_\_\_\_\_

STUDENT'S ONTARIO HEALTH CARD NUMBER \_\_\_\_\_

STUDENT'S PRIMARY ADDRESS \_\_\_\_\_ TOWN \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

NAMES OF PARENTS/GUARDIANS 1: \_\_\_\_\_ 2: \_\_\_\_\_

DATE FORM COMPLETED \_\_\_\_/\_\_\_\_/\_\_\_\_  
YYYY / MM / DD

Please complete the top of this form and:

1) Report your child's immunization record to the Health Unit by going to [hkpr.icon.ehealthontario.ca](http://hkpr.icon.ehealthontario.ca)  
**OR**

2) **By phone:** Call 1-866-888-4577 ext. 1507

**By mail or in-person:** Send or take a photocopy of your child's immunization record to:

HKPR District Health Unit  
200 Rose Glen Road  
Port Hope, ON L1A 3V6

The Haliburton, Kawartha, Pine Ridge District Health Unit is required under the Immunization of School Pupils Act (ISPA) to collect and maintain up-to-date immunization records for every child registered in school. The ISPA states that parents are required to provide the Health Unit with proof of completed immunization for measles, mumps, rubella, tetanus, diphtheria, pertussis (whooping cough), polio and meningitis. **Varicella (chicken pox) immunization is ONLY required for children born in 2010 and later.**

If you choose not to immunize your child, you must complete either a Statement of Medical Exemption or Statement of Conscience or Religious Belief Affidavit. Please contact the Health Unit for more information at 1-866-888-4577 ext. 1507

CD-102 O 1992-07 R 2017-12 R 2019-01 R 2020-11

Any personal and personal health information that you provide on this form is collected under the authority of relevant legislation including: the Health Protection and Promotion Act, as amended, the Regulated Health Professions Act, the Immunization of School Pupils Act, and the Personal Health Information Protection Act. This information will be used for assessment, management, treatment and reporting purposes. Your information may be shared within the Health Unit and as required by legislation. For information about the collection, use and disclosure of your information, please refer to the Health Unit website at [www.hkpr.on.ca](http://www.hkpr.on.ca) or contact the Medical Officer of Health, 200 Rose Glen Road, Port Hope, Ontario, L1A 3V6 or 1-866-888-4577.

**PROTECTION · PROMOTION · PREVENTION**



**HEAD OFFICE**  
200 Rose Glen Road  
Port Hope, Ontario L1A 3V6  
Phone · 1-866-888-4577  
Fax · 905-885-9551



**HALIBURTON OFFICE**  
Box 570  
191 Highland Street, Unit 301  
Haliburton, Ontario K0M 1S0  
Phone · 1-866-888-4577  
Fax · 705-457-1336



**LINDSAY OFFICE**  
108 Angeline Street South  
Lindsay, Ontario K9V 3L5  
Phone · 1-866-888-4577  
Fax · 705-324-0455