

## Keep your immunization records online!

Do you want to make sure that your family's immunization records can be easily located by a health care provider when you change doctors, or during a disease outbreak, or natural disaster?

San Diego Regional Immunization Registry (SDIR), part of the California Immunization Registry (CAIR) will enter immunization records into the centralized, secure, and confidential database. Use **one** method below to **send both the copy of the immunization record and this completed form**:

- US mail - Immunization Branch, SDIR, P.O. Box 85222, San Diego, CA 92186
- fax (619) 692-6619
- email the SDIR Help Desk at: [sdir@immunization-sd.org](mailto:sdir@immunization-sd.org)

For more information, visit the SDIR Website at:

<http://www.immunization-sd.org/sdir/about.html>

or call the SDIR Help Desk at (619) 692-5656 .

Please complete the information below. **Fill out additional form(s) if submitting more than one immunization record.**

Please print clearly and include your phone number in case we need to call you!

SUBMITTER	INDIVIDUAL ON RECORD	
Name:	Last name:	
Street Address:	First name:	
City:	Date of Birth:	
Zip Code:	Gender:	
Email:	<b>Fields below will help locate the immunization record in the future:</b>	
Home Telephone:		
Relationship to individual on the record <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Self <input type="checkbox"/> Other [specify]	<input type="checkbox"/> Mother's maiden name: _____ <input type="checkbox"/> Medical record # _____	
<b>CAIR USE ONLY:</b>		
<input type="checkbox"/> ENTERED IN SDIR		DATE: ___/___/___ STAFF INITIALS: _____
For school records: I give my permission to share this information with the SDIR/CAIR. Signature of Parent/Guardian: _____		

Note: Immunization records are **only shared** with public health, participating health care providers, schools, childcare and other authorized programs that require the review of immunization records for enrollment.