



Elkhart County Health Department

**FOR APPOINTMENTS OR
INFORMATION**

**CALL:
574-523-2127**

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PARA CITA O INFORMACION

**LLAMAR AL:
574-523-2127**

HELPFUL WEBSITES

ELKHART COUNTY HEALTH DEPARTMENT
WWW.ELKHARTCOUNTYHEALTH.ORG/

MY VAX INDIANA
WWW.MYVAXINDIANA.IN.GOV/

ISDH - INDIANA STATE DEPARTMENT OF HEALTH
WWW.IN.GOV/ISDH

CDC - IMMUNIZATIONS
WWW.CDC.GOV/VACCINES/INDEX.HTML

*** CALL US OR YOUR FAMILY
PHYSICIAN FOR MORE INFORMATION
REGARDING VACCINES***

***LLAMENOS O LLAME SU DOCTOR DE
FAMILIA PARA MAS INFORMACION
SOBRE VACUNAS.***



Public Health
Prevent. Promote. Protect.

ECHD IMMUNIZATION CLINICS



**IMMUNIZATIONS FOR CHILDREN,
ADOLESCENTS AND ADULTS**

**VACUNAS PARA NIÑOS, ADOLESCENTES Y
ADULTOS**

WWW.ELKHARTCOUNTYHEALTH.ORG



CLINIC SITES: LOCATIONS ARE NOT STAFFED AT ALL TIMES.

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SITIOS UTILIZADOS PARA CLÍNICAS: NO SIEMPRE CONTAMOS CON PERSONAL EN ESTAS LOCALIDADES.

PLEASE CALL 574-523-2127 FOR COST OF VACCINES AND TO SCHEDULE APPOINTMENTS FOR ALL CLINIC LOCATIONS.

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POR FAVOR LLAME AL 574-523-2127 PARA INFORMARSE SOBRE EL COSTO DE LAS VACUNAS Y PROGRAMAR CITAS PARA CUALQUIERA DE NUESTROS SITIOS CLÍNICO.

SITES

*ELKHART – ELKHART COUNTY HEALTH DEPARTMENT :
608 OAKLAND AVE ELKHART, IN 46516

*MIDDLEBURY – FIRST MENNONITE CHURCH:
203 E. LAWRENCE STREET MIDDLEBURY, IN 46540

*NAPPANEE – FIRST BRETHERN CHURCH:
1600 N. MAIN STREET NAPPANEE, IN 46550

*MILLERSBURG - FIRE STATION:
500 CARRIAGE LANE MILLERSBURG, IN 46543

*CLINTON FRAME CHURCH:
63846 CR 35 GOSHEN, IN 46528

**IMPORTANT:
MUST BRING
WITH YOU TO
EACH
CLINIC VISIT:**



**IMPORTANTE:
DEBE TRAER
CON UD. LO
SIGUIENTE A
CADA CITA:**

*COMPLETE AND CURRENT VACCINE RECORD

*PICTURE ID OF PARENT, GUARDIAN, AND PATIENT (IF PATIENT IS OVER THE AGE OF 16 YEARS OLD)

*SIGNED PERMISSION BY PARENT/GUARDIAN IF OTHER INDIVIDUAL, INCLUDING A STEP PARENT, BRINGS CHILD TO APPOINTMENT.

*INDIVIDUAL BRINGING CHILD TO APPOINTMENT MUST BE AGE 18 YEARS OR OLDER.

*ANY PAPERWORK PERTAINING TO CUSTODY MUST ALSO BE BROUGHT TO APPOINTMENT.

*PAYMENT BY CASH, CHECK OR CREDIT CARD. THERE IS A CONVENIENCE FEE FOR CREDIT CARD PAYMENTS.

*IF YOU ARE 10 MINUTES LATE FOR YOUR APPOINTMENT YOU MAY BE ASKED TO RESCHEDULE.

*THE STAFF WOULD APPRECIATE IT IF YOU COULD PROVIDE YOUR OWN TRANSLATOR FOR THE VISIT.

*REGISTRO DE VACUNAS DE CADA NIÑO QUE TIENEN CITA.

*IDENTIFICACIÓN CON FOTO, DE PADRE/GUARDIAN (SI EL PACIENTE TIENE 16 AÑOS O MAS)

*PERMISO FIRMADO POR PADRE/GUARDIAN SI OTRA PERSONA (TIENE QUE SER MAYOR DE 18 AÑOS)

TRAE AL NIÑO A LA CLÍNICA

*CUALQUIER DOCUMENTO QUE TENGA QUE VER CON LA CUSTODIA DEL NIÑO/A TIENE QUE TRAERLO A SU CITA

*SE ACEPTA EFECTIVO, CHEQUE O TARJETAS DE CRÉDITO. SE COBRA UN CARGO EXTRA POR USAR TARJETA

*SI LLEGA 10 MINUTOS TARDE, TENDRÁ QUE HACER UNA CITA NUEVA.

*APRECIAMOS SI PUEDE TRAER UN INTERPRETE CUANDO VENGA A LA CITA.