

# Shots Needed for South Africa

Please identify which shots you have or have not had.

NAME: \_\_\_\_\_

Hepatitis A (series of 2—Hep A is good for life after series is completed) Circle YES or NO:  
YES or NO *If yes, how many?: 1 2 If yes, approx date(s): \_\_\_\_\_*

Hepatitis B (series of 3—Hep A is good for life after series is completed) Circle YES or NO:  
YES or NO *If yes, how many?: 1 2 3 If yes, approx date(s): \_\_\_\_\_*

Tetanus (Tetanus is good for 10 years) Circle YES or NO:  
YES or NO *If yes, approx date: \_\_\_\_\_*

Typhoid (Typhoid is good for 2 years) Circle YES or NO:  
YES or NO *If yes, approx date: \_\_\_\_\_*

*If you circled NO to any of these shots, will you be getting them at the shot clinic offered at SBC (additional cost)?:* YES or NO

**There will be a shot clinic held at SBC for those who have not completed all shots (additional cost). If you have already received any of the above listed shots and have done so outside of the church you will need to provide documentation from the County.**

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