

Instructions:

- 1) Fill in the information requested in the boxes below
- 2) Fax or email to pharmacy

FACILITY/COMMUNITY INFORMATION	FACILITY CONTACT INFORMATION
Facility/Community Name:	Name:
Corporate Group (if any):	Title:
Street Address:	Phone:
City: State: ZIP:	Email:
VACCINE RECIPIENT INFORMATION	
# Patients/Residents to Be Vaccinated:	# of Staff to Be Vaccinated:
1st Dose: 2nd Dose*:	1 st Dose: 2 nd Dose*:
Booster Dose *:	Booster Dose*:
TOTAL # OF DOSES NEEDED * Product choice subject to availability.	
Pfizer	Moderna
Primary series Monovalent doses (each 0.3mL)	Primary series Monovalent doses (each 0.5mL)
Bivalent Booster doses (each 0.3mL)	Bivalent Booster doses (each 0.5mL)

Fax this form to: (800) 447-7167 or Email: vaccination@forumpharmacy.com

What happens now?

- Download clinic materials at: <u>https://www.forumpharmacy.com/facility-portal/#covid-19-clinic-info</u>
- Review our COVID-19 Vaccine Clinic Quick Guide for detailed next steps & an FAQ
- Follow the instructions to start preparing for your clinic!

Forum's Clinical Team will reach out to the contact listed above to schedule a clinic

• A completed Vaccine Roster must be received before a date can be set for your clinic

