## DPH IMMUNIZATION PROGRAM

## CT WiZ HANDOUT \& RECORD BOOKLET ORDER FORM FOR CT BIRTHING HOSPITALS

All materials are free of cost, please allow 2 weeks for processing and delivery.

|  |  | Number of Forms |
| :--- | :--- | :--- |
|  | CT WiZ Handout <br> Please include the CT WiZ Handout in the birth packets <br> for parents to take home. This information sheet comes <br> bi-lingual in English and Spanish. |  |
|  | NEW! My Child's Immunization Record <br> A pocket-sized personal 6-page booklet for parents to keep track <br> of their child's shots and other routine tests during a child's <br> checkup. Contains important phone numbers for Connecticut <br> resources. |  |

For additional Educational Materials Order Forms, visit:
https://portal.ct.gov/DPH/Immunizations/Immunization-Information-for-Health-Professionals.

## **TO PLACE YOUR ORDER**

Save this order form to your computer, fill it out, and submit a Helpdesk ticket to the Immunizations Program with your completed form attached:
https://dph-cthelpdesk.ct.gov/Ticket
In case we have questions about your order, please type/print your email and phone number:
Email: $\qquad$
Phone Number: $\qquad$

## THE BOX BELOW IS USED AS THE SHIPPING LABEL. PLEASE PRINT CLEARLY AND PROVIDE MAIL STOPS OR FLOOR/AREAS.

Date of Order: $\qquad$
Birthing Hospital Name: $\qquad$
Address: $\qquad$
$\qquad$
Attn: $\qquad$

