

People who have a COVID-19 vaccination have a much lower chance of getting sick from the disease called COVID-19.

To be vaccinated you will get a needle in your arm. You need to have 2 doses of the same vaccine 12 weeks apart.

Medical experts have studied COVID-19 vaccines to make sure they are safe. Most side effects are mild and don't last for long. As with any vaccine or medicine, there may be rare and/or unknown side effects.

Some people may still get COVID-19 after vaccination, so you must still follow public health precautions as required in your state or territory to stop the spread of COVID-19 including:

- keep your distance stay at least 1.5 metres away from other people
- washing your hands often with soap and water, or use hand sanitiser
- wear a mask, if your state or territory has advised that you should
- stay home if you are unwell with cold or flu-like symptoms and arrange to get a COVID-19 test.

Vaccination providers record all vaccinations on the Australian Immunisation Register, as required by Australian law. You can view your vaccination record online through your:

- MyGov account
- MyHealthRecord account

Name	Surname	
Date of birth	Medicare card	
Address	Phone number	
Aboriginal and/or Torres Strait Islander	Email	
Next of kin and relationship	Next of kin's phone number	

Before you get vaccinated, tell the person giving you the vaccination if you:

- Have any allergies, particularly anaphylaxis (a severe allergic reaction) to a previous dose of a COVID-19 vaccine, to an ingredient of a COVID-19 vaccine, or to other vaccines or medications. An allergy is when you come near or in contact with something and your body reacts to it and you get sick very quickly. This may include things like an itchy rash, your tongue getting bigger, your breathing getting faster, you wheeze or your heart beating faster.
- If you are immunocompromised. This means that you have a weakened immune system that may make it harder for you to fight infections and other diseases. Sometimes a disease like diabetes or cancer can cause this or certain medicines or treatments you take, such as medicine for cancer.

Question	YES	NO
Do you have any serious allergies, particularly anaphylaxis, to anything?		
Have you had an allergic reaction after being vaccinated before?		
Do you have a mast cell disorder?		
Have you had COVID-19 before?		
Do you have a bleeding disorder?		
Do you take any medicine to thin your blood (an anticoagulant therapy)?		
Do you have a weakened immune system (immunocompromised)?		
Are you pregnant or do you think you might be pregnant?		
Are you breastfeeding?		
Have you been sick with a cough, sore throat, fever or are feeling sick in another way?		
Have you had a COVID-19 vaccination before?		
Have received any other vaccination in the last 14 days?		

Please talk to your doctor if you have any questions or concerns before getting your COVID-19 vaccination.

Consent to receive COVID-19 Vaccine:

I confirm I have received and understood information provided to me on COVID-19				
vaccination.				
I confirm that none of the conditions above apply, or I have discussed these and/or any				
other special circumstances with my regular health care provider and/or vaccination				
service provider.				
I agree to receive a course of COVID-19 vaccine (two doses of the same vaccine).				
Patient's name				
Patient's signature				
Date				