

Parental Consent Form Sample for Vaccination

A **parental consent form** sample for vaccination ensures that parents or guardians provide necessary approval before their child receives any immunization. This form typically includes details about the vaccine, potential risks, and the rights of the parent and child. Using a clear and comprehensive consent form helps protect both healthcare providers and families during the vaccination process.

Parental Consent Form

Child Information

Child's Full Name:

Date of Birth:

Parent/Guardian Information

Parent/Guardian Name:

Relationship to Child:

Phone Number:

Vaccine Information

Vaccine Name/Type:

Date of Vaccination:

Risks and Side Effects

I acknowledge that I have been informed about the nature and purpose of the vaccine, possible side effects, and the benefits and risks associated with immunization.

Consent

☐ I hereby give my consent for my child to receive the specified vaccination.

Parent/Guardian Signature:

Date:

Submit