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| --- | --- | --- |
| **Simplified Chinese** |  | |
| [GP Surgery]  [First address line]  [Second address line]  [Town/city]  [County Postcode] | T [000 000 0000]  F [000 000 0000] |
| [Date] |  | |

亲爱的家长/照顾者

Dear Parent/Carer

…{insert name of child}… 应该进行免费免疫接种。

…{insert name of child}… is due for free immunisations

请于{ insert date as XX.XX.XXX} { insert time 24 hr clock}前来诊所。

Please come to the surgery on …….{insert date as XX.XX.XXX} at { insert time 24 hr clock}

或者

OR

请拨打 {insert phone number}致电诊所，以进行预约。

Please call surgery to make an appointment on {insert phone number}

如果您有孩子以前的免疫接种记录，请随身携带。

If you have any records of immunisations they have had before, please bring them with you.

谨启

Yours sincerely