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

親愛的家長/照顧者

Dear Parent/Carer

…{insert name of child}… 應該進行免費免疫接種。

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

請於{ insert date as XX.XX.XXX} { insert time 24 hr clock}前來診所。

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

或者

OR

請撥打{insert phone number}致電診所，以進行預約。

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

如果您有孩子以前的免疫接種記錄，請隨身携帶。

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

謹啟

Yours sincerely