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

Ku socota Waalidka/Daryeelaha

Dear Parent/Carer

…{insert name of child}… waa inuu tallaal bilaash ah u yimaado

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

Fadlan imow rugta caafimaad taariikhda…….{insert date as XX.XX.XXX} marka ay saacaddu tahay {insert time 24 hr clock}

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

AMA

OR

Fadlan wac rugta caafimaad si aad ballan u samayso, ka wac {insert phone number}

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

Haddii aad qabtid diiwaanka tallaalada hore ee lagu sameeyay, fadlan hore u soo qaado.

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

Anigoo daacad ku ah

Yours sincerely