

Insert Practice Address:  
Insert Phone Number:

Insert Date:

Dear ...(name)

We would like to invite you to come for your Flu Vaccine.



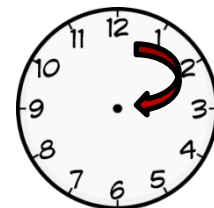
This will take place at ... (Health Centre)

INSERT PHOTO  
OF HEALTH  
CENTRE

This will be on **Tuesday 22<sup>nd</sup> of September**

At **9 o'clock Morning**

The appointment should take 15 minutes.



<p>Please wear a face covering.</p>	
<p>Please wear a top with short sleeves.</p>	
<p>The person giving you your flu vaccination will be wearing a face mask, gloves and an apron.</p>	
<p>Please bring this letter with you to your appointment.</p>	
<p>If you cannot make this appointment please let us know (insert phone number)</p>	

**Yours Sincerely**

[Click here to enter electronic signature if available](#)