|  |  |  |
| --- | --- | --- |
| [Provider letterhead plus NHS logo]  Template letter for children aged 2 and 3 years old |  | |
| [GP Surgery]  [First address line]  [Second address line]  [Town/city]  [County Postcode] | T [000 000 0000] |
| [Date] |  | |

Dear [Name]

«**Insert child’s name** »**’s annual flu vaccination is now due**

This vaccination is recommended to help protect your child against flu. Flu can be an unpleasant illness and sometimes causes serious complications. Children under the age of 5 years have one of the highest rates of hospital admissions due to flu.

Vaccinating your child will also help protect more vulnerable friends and family by preventing the spread of flu.

**Please phone [insert number] to book an appointment for [insert child’s name]’s flu vaccination.**

The vaccination is free of charge. Your child will be assessed to confirm the most suitable vaccine when you come to the practice. Most children are offered a nasal spray vaccine which is a quick and painless spray up the nose.

We look forward to seeing «**Insert child’s first name**» soon.

Yours sincerely,

[GP/Practice Nurse/Practice Manager name]

[Position/title]

**For more information visit:** [**www.nhs.uk/child-flu**](http://www.nhs.uk/child-flu)

**-------------------------------------------------------------------------------------------------------------**

As a reminder you can use this section to record the date and time of your child’s vaccination appointment:

**on: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_am/pm**

**Date Time**