



Wayne County Public Health

1519 Nye Road, Suite 200, Lyons, New York 14489

Tel: (315) 946-5749 • Fax: (315) 946-5762

Email: WCPH@co.wayne.ny.us

Diane Devlin, Director of Public Health



Public Health
Prevent. Promote. Protect.
Wayne County, NY

IMMUNIZATION CLINIC

Copy Insurance Cards in Space Above

For Uninsured / Underinsured Only:

Number of persons in household_____

Total monthly household income_____ Charge according to sliding fee scale_____

I hereby certify that all of the above information is true and correct to the best of my knowledge. I authorize Wayne County Public Health to release any medical or other information necessary to process an insurance claim on my behalf. This release will also authorize my insurance company/ 3rd party payer to forward payment for services directly to this agency. Such information will remain confidential and will be used only for the purpose stated above. I also understand that required services will be provided regardless of my ability to pay. However, in the instance my insurance does not cover the charges I am responsible for payment. I give permission for all immunizations received today to be entered into the NYSIIS database. I understand that it is my responsibility to notify my primary care physician that I received the flu shot. I understand that Wayne County Public Health will not be responsible for providing documentation for this immunization to my physician.

Signature_____

Date_____