

Survey for COVID-19 Vaccination

This is a survey that asks residents aged between 16 and 59 if they wish to be vaccinated for COVID-19.

If you wish to be vaccinated at the venue administered by the town, please return the survey form which is the reverse side of this notice by mail or register on the town's website. Vaccination dates and locations will be announced as soon as the survey is completed. We ask for your understanding and cooperation.

1. How to submit the survey

Either

- by mail (Fill out the form (reverse side) and post it.)
- via the town's website (QR code)

↓ QR Code for Survey



2. Deadline

August 13th (Friday)

3. Notes

- Please answer whether or not you have any underlying medical conditions in the survey form. You do not need to notify us of it individually.
- If you do not wish to be vaccinated at the venue administered by the town, are scheduled to be vaccinated at work place or school, or have been vaccinated, you do not have to reply.
- If you wish to be vaccinated at large vaccination centers in Gunma or other prefectures, please make an appointment by yourself. Please be informed that the large vaccination centers use the Moderna Vaccine (only for those who are 18 years old or older).
- Vaccinations for people who are 59 years old or younger will start around September.
- Please note that the vaccination timing may be delayed depending on the supply of the vaccine.
- Please keep your inoculation tickets in a safe place so that you do not lose them.
- If you receive other vaccinations before or after COVID-19 vaccination, please make an interval of at least 13 days in principle.

※ **If you wish to respond by mail, please fill in the information on the back of this notice, put it in the envelope and send to the Health Promotion Division.**

Contact Information

Oizumi Town Health & Welfare General Center

Health Promotion Division TEL: 0276-62-2121

(8:30~17:15, Monday ~ Friday)

Call Center TEL: 0276-55-4661

(9:00~17:00, Monday ~ Friday)

Survey for COVID-19 Vaccination (Kibou-Chosa-Hyo)

- ※ If you have any underlying medical conditions, please circle "Yes".
- ※ If your family who are aged between 16 and 59 wish to be vaccinated on the same day with you, please list in the table below.

Deadline: August 13th (Fri.)

(Katakana) Name	Date of Birth	Phone Number	Inoculation Number	Occu- pation	Underlying Disease
					Yes · No
					Yes · No
					Yes · No
					Yes · No
					Yes · No
					Yes · No

The subject of this survey is as of June 30th.

- ※ As for underlying medical conditions, please check the reverse side of "Requests from Tatebayashishi Ouragun Medical Association"