

Child Health and Immunization Follow-Up

Date: [Insert Date]

To: [Parent's Name]

Address: [Parent's Address]

Dear [Parent's Name],

We hope this message finds you and your family well. This is a follow-up regarding your child's health and immunization status. It is important to ensure that your child is up-to-date with their vaccinations to protect them from preventable diseases.

According to our records, your child, [Child's Name], was last vaccinated on [Last Vaccination Date]. The following vaccinations are recommended to be completed:

- [Vaccine Name 1] - Due by [Due Date]
- [Vaccine Name 2] - Due by [Due Date]
- [Vaccine Name 3] - Due by [Due Date]

Please contact our clinic at [Clinic Phone Number] or visit us at [Clinic Address] to schedule an appointment. Maintaining your child's immunization schedule is vital to their health and the health of the community.

Thank you for your attention to this important matter. We look forward to hearing from you soon.

Sincerely,

[Your Name]

[Your Title]

[Clinic or Organization Name]