

Vaccination Record Request

Date: [Insert Date]

To Whom It May Concern,

I hope this message finds you well. I am writing to request a copy of my vaccination record as it is required for my registration to participate in the upcoming [Event Name] scheduled for [Event Date].

My details are as follows:

- Name: [Your Full Name]
- Date of Birth: [Your Date of Birth]
- Email Address: [Your Email Address]
- Phone Number: [Your Phone Number]

Please send my vaccination record to the email address provided above or to my mailing address:

[Your Mailing Address]

Thank you for your attention to this matter. I appreciate your assistance and look forward to your prompt response.

Sincerely,

[Your Name]