

Appendix L(ii)

VACCINATION SUBSIDY SCHEME (VSS)

**TERMS AND CONDITIONS
of the COVID-19 VACCINATION PROGRAMME - VSS SCHOOL
OUTREACH
(Supplementary to Terms and Conditions of the COVID-19 Vaccination
Programme at Clinics)**

Preamble

- (a) This document titled Appendix L(ii) “Terms and Conditions of the COVID-19 Vaccination Programme - **Vaccination Subsidy Scheme** School Outreach - ” (“Agreement for School Outreach”) shall be read in conjunction with the “Terms and Conditions of the COVID-19 Vaccination Programme at Clinics” (“Agreement at Clinic”). Unless otherwise defined or stated in this Agreement, Terms defined in Appendix L shall be applicable to this Appendix L(ii) which shall be deemed incorporated in this Agreement. The terms and conditions of this Agreement should only be applicable to and binding on those Enrolled Healthcare Providers(EHCPs) and their Associated Organizations who have indicated acceptance to participate in the COVID-19 Vaccination Programme - **Vaccination Subsidy Scheme** School Outreach (“School Outreach Programme”). The Government shall from time to time invite EHCPs and their Associated Organizations to participate in the School Outreach Programme. Those invited and propose to participate in the School Outreach Programme shall be required to sign and return a prescribed acceptance form indicating their agreement to join the School Outreach Programme before a binding Agreement is formed between the Government and the EHCP and his Associated Organization containing the terms and conditions set out this Appendix L(ii), the Government’s invitation letter, as well as those set out in the acceptance form (“this Agreement”).
- (b) Each EHCP and his Associated Organization (if any) shall remain as party to the VSS Agreement, the Agreement at Clinic and this Agreement if that EHCP or his Associated Organization shall provide COVID-19 Vaccination to Eligible Persons under the School Outreach Programme pursuant to this Agreement.
- (c) This Preamble and the Schedule form of part this Agreement and are equally binding on the EHCP and his Associated Organization.

Operative Part

1. In consideration of the Government agreeing to pay the Subsidy in respect of Vaccinations under the the School Outreach Programme, the EHCP and his Associated Organization jointly and severally undertake and agree to observe all provisions set out in this Agreement, the Agreement at Clinics, the VSS Agreement and the Vaccination Subsidy Scheme (VSS) Doctors' Guide as well as the Doctors' Guide, which here refers to the Coronavirus Disease 2019 (COVID-19) Vaccination Programme under the Vaccination Subsidy Scheme (VSS) at Non-clinic Setting and the School Outreach
(https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_nonclinic.pdf) to be read with The Doctors' Guide for COVID-19 Vaccination Programme at Clinics under the Vaccination Subsidy Scheme
(https://www.covidvaccine.gov.hk/pdf/VSS_D-octorsGuide.pdf) (“the Doctors' Guide”)
2. Similar to COVID-19 Vaccination Programme at Clinics, the EHCP and the Associated Organization shall not require the Eligible Person to pay any service fee for the COVID-19 Vaccination. They shall not charge the schools or the students joining the School Outreach Programme for any amount howsoever described in respect of the any services provided under this School Outreach Programme.
3. The name of the EHCP, the name and address of the clinic and the telephone number in Chinese and English as provided to the Government shall be provided to Education Bureau for coordination and administration of the School Outreach Programme.
4. The above name and address of the clinic as mentioned at clause 3 will be added in the eHealth System (Subsidies) for submitting reimbursement claims.
5. The Doctors' Guide for COVID-19 Vaccination may be updated from time to time and the latest version will be published on the website mentioned in paragraph 1 above. EHCP and his Associated Organization (if any) should refer to the latest version for the detailed requirements and are required to follow the Doctors' Guide for COVID-19 Vaccination.
6. On top of the right to terminate or suspend this Agreement under Clauses 7 and 8 of the Agreement at Clinic which are deemed to have been incorporated herein (and for the avoidance of doubt any of the grounds specified below may entitle the Government to terminate this Agreement under the aforesaid Clause 7 but not just suspension), the Government may suspend the EHCP's participation in

the School Outreach Programme by given the written notice to an EHCP (suspension notice) should the EHCP or his Associated Organization be found

- (a) to have failed to submit the Notification Form using the prescribed template two weeks in advance of an outreach visit to a school to the Programme Management and Vaccination Division in accordance with Clause 9;
 - (b) to have failed to provide the health education/ promotion materials in relation to the Vaccination activities to the Programme Management and Vaccination Division for comment before issue in accordance with Clause 10;
 - (c) to have failed to provide the Vaccination record printout appropriately to the Vaccine recipient after Vaccination in accordance with Clause 13;
 - (d) under any investigation on allegation of non-compliance of the requirements as stipulated in this Agreement or the Doctor's Guide; or
 - (e) under any other circumstances as considered necessary by the Government.
7. The Suspension period, if not specified in the Suspension Notice, will take effect from the date of the Suspension Notice until a written notice is issued by the Government to lift the Suspension (if any). Throughout the period of Suspension, the Government has no obligation to reimburse any Subsidy for Vaccination provided during the Suspension Period.

Obligations of the EHCP and his Associated Organization

8. The EHCP and his Associated Organization shall ensure the outreach venue for performing the Vaccination is safe, well-lit, well-ventilated, clean and suitable for COVID-19 Vaccination including but not limited to sufficient space for registration, waiting area for Vaccine recipient to read and understand the information related to COVID-19 vaccines, COVID-19 Vaccination, observation area after Vaccination and sick bay for emergency treatment when necessary.
9. The EHCP and his Associated Organization shall inform the Programme Management and Vaccination Division (PMVD) of the Department of Health two weeks before an outreach visit is held at a school for performing the Vaccination using the form prescribed by the Department of Health ("Notification Form"). All terms appearing in the Notification Form have the meanings given to them in this Agreement. The Government shall have no obligation to pay an EHCP or his Associated Organization any Subsidy for the Vaccinations if the EHCP or his Associated Organization fails to make prior notification using the Notification Form to PMVD in good time. If the first or second dose to be given to a Vaccination recipient will be held at the EHCP's

Clinic covered by the Agreement at Clinic rather than the outreach venue, the filing of the Notification Form would not be required for such Vaccination.

10. The EHCP and his Associated Organization shall ensure any all information in the health education/ promotion materials in relation to the Vaccination activities are correct, and provide these materials to PMVD for checking before issue. The EHCP and his Associated Organization shall not take advantages of an outreach visit for the purpose of its business. No advertising, touting activities or proactive sales to the students and their parents/guardians shall be allowed. Distribution of souvenirs or other promotional materials (other than those provided by the Government) is not allowed during the whole visit.
11. The EHCP and his Associated Organization shall order COVID-19 Vaccines through the web-based ordering system at least one week before the outreach visit to ensure sufficient Vaccines and any essential supplies for the outreach visit.
12. The EHCP and his Associated Organization shall be responsible for the transportation of the COVID-19 Vaccines and any essential supplies as required by the Doctors' Guide to the outreach venue for the Vaccination activities and return the unused Vaccines and essential supplies to their Clinic. The EHCP and his Associated Organization shall ensure the cold chain of the vaccines, storage condition and temperature of vaccines are maintained within required temperature as stated in the drug insert throughout transportation and the entire outreach visit.
13. The EHCP shall ensure that relevant information and the risks related to the Vaccination have been explained to the Vaccination recipient. The explanation includes those as required in section 8(1)(a) of Cap 599K, viz., the Vaccine is authorized under Cap 599K instead of registered. Following from this explanation, the EHCP shall ensure that the Vaccination recipient should have given the consent as required under section 8(1)(b) of Cap 599K ("informed consent") in the form of the written Consent Form as signed by the Vaccination recipient. For identification purpose, a copy of the Consent Form is set out in the Annex I.
14. For those Vaccination recipients who are minor, if their parent or guardian cannot physically attend the Vaccination at the outreach visit, whilst the EHCP is not required to personally provide the aforesaid on the spot at the outreach venue, the EHCP should provide to such parent or guardian the requisite explanation over the phone, if requested by the school prior to the visit to the school for the Vaccination.

15. The EHCP and his Association Organization shall ensure sufficient equipment including the smart card reader, printer(s) and computer(s) with internet connection is available at the outreach venue for reading the card face data of the Hong Kong Identity Card of the Vaccine recipient, checking the identity documents and inputting relevant details, checking the Vaccination record and Vaccination history, submitting the reimbursement claims and providing a Vaccination record print out to the Vaccine recipient.
16. Where the Vaccination recipients are minor, the EHCP shall have ensured that a duly completed Consent Form has been signed by his parent or guardian before the administration of the Vaccination. He should have also ensured that the school is satisfied that the signing the Consent Form should have provided sufficient evidence to the school to prove his capacity. In the case of a guardian, he must have produced a guardianship order to them to prove that he has been appointed.
17. The EHCP and his Association Organization shall ensure there are at least one doctor in-charge and one registered nurse with emergency training such as basic life support present throughout the performance of Vaccination during an outreach visit.
18. To prevent duplicated doses, the EHCP (and his Associated Organisation(s)) must check the Vaccination record of individuals at the eHealth System (Subsidies) before administering the COVID-19 vaccines. The EHCP (and his Associated Organisation(s)) should also assess the suitability for Vaccination, with reference to the general guidelines provided in the Doctors' Guide, before providing the Vaccination. The Vaccination record in eHealth System (Subsidies) and Vaccination information for reimbursement claim should be input on the same date of the Vaccination. Relevant details, including the standard procedures and information to be provided / explained to recipients to the parents/ guardians for obtaining informed consent, would be provided in the Doctors' Guide for COVID-19 Vaccination Programme in due course.
19. The EHCP (and his Associated Organisation(s)) must observe the recipients for 30 minutes after Vaccination and be equipped to provide emergency medical treatment for immediate adverse reaction such as anaphylaxis.
20. The EHCP (and his Associated Organisation(s)) must contact the Eligible Persons who have received the first dose to remind them to arrange for the next dose at the prescribed interval for the relevant COVID-19 vaccines to be set out

in the Doctors' Guide. A separate consent form shall be obtained for the next dose.

21. The EHCP (and his Associated Organisation(s)) should enquire whether an Eligible Person, if applicable, will join the Electronic Record Sharing System (eHRSS) and assist the Eligible Person to register under the eHRSS using the integrated function provided under the eHealth System (Subsidies) entry page. The COVID-19 Vaccination information will be automatically uploaded to the eHRSS if the Eligible Person has joined the eHRSS. The willingness to join the eHRSS would not affect the Eligible Person's eligibility to receive Vaccination.
22. When submitting the reimbursement claim, the EHCP and his Associated Organization shall ensure the correct venue code and the category of the Vaccine recipient have been selected.
23. The healthcare personnel on site at the outreach venue should ensure the information of the Vaccination record print out is correct before issuing to the Vaccine recipient.
24. The EHCP and his Associated Organization shall arrange ahead of time to dispose the clinical waste after the Vaccination outreach visit according to the guidelines from the Environmental Protection Department (EPD) <https://www.epd.gov.hk/epd/clinicalwaste/en/smallproducer.html> and/or other instructions by the Government in handling clinical waste disposal.
25. The EHCP and his Associated Organization are NOT allowed to promote or display or distribute any promotion material of their services or other person's healthcare services during the vaccination activity.
26. For paying any visits to the schools, the ECHP and all other members of the outreach team shall follow the vaccine bubble requirement in schools as required by the Education Bureau (EDB). For the detailed arrangement please refer to EDB's letter at the link https://www.edb.gov.hk/attachment/tc/sch-admin/admin/about-sch/diseases-prevention/edb_20220120_chi_a.pdf
You shall also pay attention to the latest information about the epidemic prevention arrangement at the link <https://www.edb.gov.hk/tc/sch-admin/admin/about-sch/diseases-prevention/index.html>
27. Subject to the foregoing, and to the extent not inconsistent with this Agreement, all provisions set out in Clauses 10 to 39 of the Agreement at Clinic shall be deemed to have been incorporated into this Agreement. References in these

Clauses to terms defined Clause 1.2 of the Schedule to this Agreement shall have the meanings given to them in that Clause 1.2 and will not follow the meanings given to them in the Agreement at Clinic.

Obligations of the Government

28. The Government shall be responsible for the procurement of the COVID-19 Vaccines, and arrange delivery of the Vaccines to the EHCP's Clinic, but not the schools of Vaccination outreach visit. The doctors should arrange transportation of the COVID-19 Vaccines to the outreach venue and return the unused vaccines to their Clinics. The COVID-19 Vaccines to be allocated shall be determined solely by the Government and subject to availability. Confirmed orders for the COVID-19 Vaccines will be delivered by an appointed vaccine distributor to the Clinic within 5 working days from the date of order confirmation by the Government.

29. Payment of the Subsidy shall be made by the Government crediting the Nominated Account for each valid Vaccination excluding any late claim which the Government has a right to reject payment. The Subsidy per dose of COVID-19 Vaccine given to Eligible Person shall be as set out in Clause 29.1 below provided that all doses of the Vaccination must be provided at the school under this School Outreach Programme during the outreach visit.

- 29.1 HK\$120 per dose (regardless of dose sequence or age) if the Eligible Person is a student of the participating primary school or kindergarten or a parent or staff of the school.

30. There will be a one-off outreach vaccination allowance payable to the EHCP and his Association for each outreach visit to participating primary school(s) or kindergarten(s). The allowance level for an outreach visit will depend on the number of Vaccinations actually provided in that outreach visit and to be announced by the Government from time to time.

31. A special administrative allowance will also be provided at \$1,200 per school for liaison and on-site administrative work for each school allocated the EHCP and his Association by the Government.

32. In addition to the one-off outreach vaccination allowance and special administrative allowance under Clause 31, there will be another allowance of HK\$800 per hour and HK\$400 for each subsequent half-hour for providing health talk and pre-vaccination health consultation/assessment by the EHCP or another doctor assigned by the Associated Organization in a separate session before the Vaccination outreach visit. For health talk less than an hour but

more than 30 minutes, the amount of the allowance will be HK\$400. No allowance will be paid for health talk less than 30 minutes.

33. The amount of time duration for health talk and pre-vaccination health consultation/assessment has to be notified to Department of Health (DH) in a Notification Form at least 2 weeks before the date for such health talk or pre-vaccination health consultation/assessment. The Notification Form with time duration for health talk or pre-vaccination health consultation/assessment should be confirmed and counter-signed by the school before submission to DH. The Government has the right to conduct an on-site inspection to ensure the health talk or pre-vaccination health consultation/assessment is provided as stated in the Notification Form.
34. Payment of any approved claim of the allowance as stipulated in Clauses 29 to 32 shall be made by the Government by crediting to the Nominated Account or via bank cheque to the Associated Organization as decided by the Government excluding any late claim. A claim is late if it is lodged 30 days after the outreach visit (for the subsidy or allowance under Clauses 29 and 31); or if it is lodged 30 days after the consultation or health talk or pre-vaccination health consultation/assessment for the allowance under Clause 32) which the Government has a right to reject payment.
35. Subject to the foregoing, and to the extent not inconsistent with this Agreement, all provisions set out in Clauses 40 to 49 (excluding Clause 43) of the Agreement at Clinic shall be deemed to have been incorporated into this Agreement. References in these Clauses to terms defined in Clause 1.2 of Schedule to this Agreement shall have the meanings given to them in that Clause and will not follow the meanings given to them in the Agreement at Clinic.

Inspection of the Vaccination Activities

36. The Director of Health may perform random onsite inspection at the schools for Vaccination to ensure the outreach venue is appropriate for Vaccination outreach visit, the quality of Vaccination provided by the EHCP meets the requirements and standards set out in the Agreement and the Doctor's Guide.

Others

37. All provisions set out in Clauses 5, 6, 51 to 78 of the Agreement at Clinic shall be deemed to have been incorporated into this Agreement. References in these Clauses to terms defined in Clause 1.2 of the Schedule to this Agreement shall have the meanings given to them in that Clause 1.2 and will not follow the meanings given to them in the Agreement at Clinic.

SCHEDULE

1.1 In this Agreement, unless otherwise defined in this Agreement, terms defined in Schedule 1 to the Agreement at Clinic shall have the same meanings given to them as they appear in this Agreement. Clauses 1.2 to 1.6 of the Schedule to the Agreement at Clinic shall apply to this Agreement mutatis mutandis.

1.2 In addition, the following terms shall have the following meanings:

“Agreement” has the meaning given to it Preamble (a) to this Agreement.

“Associated Organization” means the Medical Organization specified in the acceptance form completed and returned to DH as mentioned in Preamble (b).

“Clinic” has the meaning given to the term in Agreement at Clinic.

“COVID-19 Vaccines” or **“Vaccines”** (in upper or lower case) means such brand of COVID-19 Vaccines to be announced by the Government from time to time for the purpose of COVID-19 Vaccination Programme for School Outreach at Primary School and Kindergarten/ CCC.

“The Doctors’ Guide”, refers to the Coronavirus Disease 2019 (COVID-19) Vaccination Programme under the Vaccination Subsidy Scheme (VSS) at Non-clinic Setting and the School Outreach

(https://www.chp.gov.hk/files/pdf/vssdoctorsguide_covid19_nonclinic.pdf) to be read with The Doctors’ Guide for COVID-19 Vaccination Programme at Clinics under the Vaccination Subsidy Scheme

(https://www.covidvaccine.gov.hk/pdf/VSS_DoctorsGuide.pdf)

“Eligible Persons” or **“Vaccination recipients”** means such group of persons as from time to time announced by DH as being eligible for receiving Vaccinations under the School Outreach Programme. For the time being, they should include all students at or above the age of five as on the day of vaccination, and parents and staff who are Hong Kong residents, of the participating schools.

“Enrolled Health Care Provider” or **“EHCP”** means the Registered Medical Practitioner specified in the acceptance form completed and returned to DH as mentioned in Preamble (b).

“Healthcare Personnel” or **“Health Personnel”** means (a) the EHCP; (b) another Registered Medical Practitioner; or (c) a Vaccinator, to provide Vaccination under this Agreement.

“One-off outreach vaccination allowance” means an allowance to be paid to the EHCP and his Associated Organization by crediting to the Nominated Account or by bank cheque for each outreach visit to an outreach venue for the provision of Vaccination payable under Clause 30. The allowance level is based on the number of Vaccinations provided per outreach visit and are in two tiers as follows:-

- (i) \$10,067 for an outreach visit* providing 100 to 149 doses
- (ii) \$14,200 for an outreach visit* providing more than 150 doses

*If more than one than one outreach visits are required for completing 1st dose of consented students, the allowance will be based on the cumulative number of doses of all these outreach visits. Similar basis is also applicable to each subsequent dose.

“Outreach venue” means in relation to an outreach visit, the school allocated to the EHCP and his Associated Organization by DH.

“Schools” mean and include primary schools registered under the Education Ordinance (Cap. 279 of the Laws of Hong Kong) which provide primary education and kindergartens (including kindergarten-cum-child care centres) registered under the Education Ordinance (Cap 279 of the Laws of Hong Kong) which provide kindergarten education, or child care centres registered under the Child Care Services Ordinance (Chapter 243, Laws of Hong Kong) which provide pre-primary services.

“Special administrative allowance” means an allowance to be paid to the EHCP and his Associated Organization by crediting to the Nominated Account or by bank cheque for liaison and on-site administrative work for each school allocated to the EHCP and his Association by the Government. The current allowance level is at \$1,200 per school.

“Subsidy” means the Subsidy per dose of COVID-19 Vaccine given to Eligible Person shall be as stated in Clause 29.1 , whichever is applicable, plus where applicable the allowance payable under Clauses 30 to 32.

“Vaccination Period” means A period announced by the Government for giving COVID-19 Vaccinations to Eligible Persons under the COVID-19 Vaccination Programme at Non-Clinic Setting. After the end of this period, another acceptance form for a new Vaccination Period shall be required before the EHCP and his Associated Organization may continue to be party to this Agreement.

“Vaccinator” means a registered nurse, enrolled nurse or other qualified registered healthcare professionals to provide COVID-19 Vaccination under this Agreement.

CoronaVac – Inactivated Vaccine (Vero Cell) (Sinovac)

**Consent Form for the COVID-19 Vaccination Programme
– Primary Schools and Kindergartens**



Note: Please complete this form in BLOCK letters using black or blue pen and put a “✓” in appropriate boxes and *delete as appropriate.

- All vaccine recipients should bring the (1) ORIGINAL COPY of the relevant identity document on the day vaccination AND (2) Student handbook or student card with photo.
- Please read the (1) Vaccination Fact Sheet and (2) FAQs on the following websites:
(1) https://www.covidvaccine.gov.hk/pdf/COVID19VaccinationFactSheet_CoronaVac_ENG.pdf (1)
(2) https://www.covidvaccine.gov.hk/pdf/FAQ_children_adolescents_ENG.pdf



Part 1. Personal Details of Vaccine Recipient (as indicated on identity document)

Personal Information	
School Name: _____ Class: _____ Class No.: _____	
Name: _____ (English) (surname) (given name)	
(Chinese) (surname) (given name)	
Date of Birth: ____/____/____ (DD/MM/YYYY) Gender: _____	
Identity Document (Please put a “✓” in the box and fill in the document number as appropriate)	
<ul style="list-style-type: none"> • If the vaccine recipient has Hong Kong Identity Card (HKIC), please fill in information of the HKIC • If the vaccine recipient does not have HK Identity card, please fill in the Hong Kong Birth Certificate Registration No.; but if the vaccine recipient was not born in Hong Kong, please fill in the relevant identity document number 	
<input type="checkbox"/> Hong Kong Identity Card No.:	_____ ()
Date of Issue: ____/____/____ (dd/mm/yyyy)	HKIC Symbol: <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> R <input type="checkbox"/> U
<input type="checkbox"/> Hong Kong Birth Certificate Registration No.:	_____ ()
<input type="checkbox"/> Hong Kong Re-entry Permit No. (Beginning with "RM" / "RS"):	R _____
Date of Issue: ____/____/____ (dd/mm/yyyy)	
<input type="checkbox"/> Hong Kong Birth Certificate Registration No.: HKSAR Document of Identity No. (Beginning with "D"):	D _____
Date of Issue: ____/____/____ (dd/mm/yyyy)	
<input type="checkbox"/> Permit to Remain in HKSAR (ID 235B) - Birth Entry No.:	_____ ()
Permitted to remain until: ____/____/____ (dd/mm/yyyy)	
<input type="checkbox"/> Non-Hong Kong Travel Documents No. (e.g. Foreign passports):	_____
HKSAR Visa / Reference No.:	_____-_____-____ ()
<input type="checkbox"/> Certificate issued by the Births Registry for adopted children - No. of Entry:	_____/_____
<input type="checkbox"/> If the recipient is not the holder of the above documents, please enclose a copy of other identity document.	Document number: _____

Part 2: Consent to Administration of COVID-19 Vaccination

I consent to (a) the administration of COVID-19 Vaccination to my child / my ward * under the COVID-19 Vaccination Programme (see particulars in Part 3); and (b) the access and use by the Department of Health and the relevant organisations collaborated with the Government (including the University of Hong Kong) of my child/ my ward's * clinical data held by the Hospital Authority and the relevant private healthcare facilities and healthcare professionals for the purpose of continuously monitoring of the safety and clinical events associated with COVID-19 Vaccination by the Department of Health insofar as such access and use are necessary for the purpose.

Part 3: Particulars of COVID-19 Vaccination

Note: A consent form is required for each dose of vaccination

A. Type and Dose Sequence of COVID-19 vaccination (Put a “✓” in the most appropriate box)

CoronaVac – Inactivated Vaccine (Vero Cell) (Sinovac)		
<input type="checkbox"/> First dose	<input type="checkbox"/> Second dose	<input type="checkbox"/> Others, please specify: _____ dose

B. CoronaVac should not be given to persons with the following conditions

If the vaccine recipient has the following condition(s), please ✓ in the appropriate <input type="checkbox"/> .	Vaccine Recipient has the following condition(s):
● History of allergic reaction to CoronaVac or other inactivated vaccine, or any component of CoronaVac (active* or inactive* ingredients, or any material used in manufacturing process);	<input type="checkbox"/>
● Previous severe allergic reactions to the vaccine (eg, acute anaphylaxis, angioedema, dyspnea, etc.);	<input type="checkbox"/>
● Severe neurological conditions (eg, transverse myelitis, Guillain-Barré syndrome, demyelinating diseases, etc.);	<input type="checkbox"/>
● Uncontrolled severe chronic diseases; (Note: Common chronic diseases include diabetes, hypertension and coronary heart disease, etc. If your chronic disease is stable, you should receive the vaccine for protection because chronically-ill persons have a higher risk of serious illness or death from COVID-19 infection. If you are unsure about your condition, or if there is a recent change in your disease/ recent adjustment of drugs/ recent need for referral, etc, please discuss with your family doctor or attending doctor the appropriate time for vaccination.)	<input type="checkbox"/>

* Including inactivated SARS-CoV-2 Virus (CZ02 strain), aluminium hydroxide, disodium hydrogen phosphate dodecahydrate, sodium dihydrogen phosphate monohydrate, and sodium chloride.

Part 4: Declaration and Signature

To be completed by parent / guardian

I have read and I understood the information in the Vaccination Fact Sheet for the COVID-19 vaccine particularised in Part 3, including contraindications (and possible adverse events) of COVID-19 vaccination, the vaccine product is authorised under the Prevention and Control of Disease (Use of Vaccines) Regulation (Cap. 599K) for specified purpose for prevention of COVID-19 infection but has not been registered under the Pharmacy and Poisons Ordinance (Cap. 138), and agree on behalf of my child / ward* to receive the COVID-19 vaccine particularised in Part 3. I have had the opportunity to ask questions and all of my questions were answered to my satisfaction. I also fully understood my obligation and liability under this consent form and the Statement(s) of Purpose of Collection of Personal Data.

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I confirm that by signing underneath, I consent to (a) the administration of COVID-19 Vaccination to my child / my ward * under the COVID-19 Vaccination Programme (see particulars in Part 3); and (b) the access and use by the Department of Health and the relevant organisations collaborated with the Government (including the University of Hong Kong) of my child / my ward's * clinical data held by the Hospital Authority and the relevant private healthcare facilities and healthcare professionals for the purpose of continuously monitoring of the safety and clinical events associated with COVID-19 Vaccination by the Department of Health insofar as such access and use are necessary for the purpose.

I declare the information provided in this form is correct.

I agree to provide my child / my ward's* personal data in this form for the use by the Government for the purposes as set out in the "Statement of Purpose of Collection of Personal Data". I understand that the Government may contact me to verify the information and the arrangement of the vaccination.

For Smart Identity Card holder: I agree to authorise the Healthcare Providers / public officers to read my child / my ward's* personal data [limited to Hong Kong Identity Card No., Name (in English and Chinese), date of birth and date of issue of Hong Kong Identity Card] saved in the chip embodied in my/ my child / my ward's* Smart Identity Card for the use by the Government for the purposes as set out in the "Statement of Purpose of Collection of Personal Data".

This consent form shall be governed by and construed in accordance with the laws of Hong Kong Special Administrative Region and I shall irrevocably submit to the exclusive jurisdiction of the Courts of Hong Kong Special Administrative Region.

Signature of Parent / Guardian*: _____

Name of Parent / Guardian* (in English): _____

Relationship: _____

HKID/ Other Identity Document
- Document Type and Document No. of Parent/ Guardian*: _____

Contact Telephone No.: _____

Date: _____

To be completed by Healthcare Provider (Not required for Community Vaccination Centre)		
	1 st Dose	2 nd Dose
eHS(S) Transaction No. ONE TRANSACTION NUMBER ONLY (if applicable)	T _____ - _____ - _____	T _____ - _____ - _____
Date of Vaccination		
Name of Doctor		