## GCHD COVID Vaccine Registration Instructions

After clicking on the link or scanning the QR code provided, you should arrive at the following page:



the blue bar is greyed out, there will be a small grey box underneath where the blue/grey box it that you will need to enter the Access code into (See the circled box in the picture below).

By answering 'Yes' to the 'I GIVE CONSENT' question on the following page, you GIVE CONSENT to the Galveston County Health District to receive a COVID-19 vaccine.



Once the access code has been entered in correctly (the access code is case sensitive). The button will turn blue for you to click to proceed. On the next screen you will need to fill out all of your information and answer all of the questions before the button at the bottom will allow you to proceed.

Vaccine Administration	
Personal Information	
Cell Number *	
Contact Email *	
First Name (of person receiving vaccination) *	
Last Name (of person receiving vaccination) *	
I GIVE CONSENT for the named person to receive a COVID-19 vaccine *	
Please select if you are in any of the 1A or 1B categories below: *please bring a form of identification for verification *	
Birth Date (of person receiving vaccination) *	
Sex (of person receiving vaccination) *	
Race (of person receiving vaccination) *	
Ethnicity (of person receiving vaccination) *	
Country of Birth (of person receiving vaccination) *	
Full Name of Responsible Person (consenting adult, if a minor is receiving vaccination) *	
Street Address *	
Zip Code *	
City	
State *	
County	
Is this registration done through a Call Center? *	
CLICK TO PROCEED WITH SCREEN	

After completing the personal information page and proceeding to the next page you will need to answer the vaccine screening questions. If you answer the questions and it will not allow you to book an appointment, please call the GCHD phone bank at 409-938-7221 to discuss your answers and if you will be allowed to book an appointment.

4.	Have you received any other vaccinations in the past 14 days?
O Yes	
⊘ №	
	5. Have you been diagnosed with COVID-19 in the past?
0 Ves	
6. Have you ever a reaction for wi	had a severe allergic reaction (e.g. anaphytaxis) to something? For example, hich you were treated with epinephrine or EpiPen, or for which you had to go to the hospital?
Ves	
. Ø No	
7. Did ya	ou have a severe allergic reaction after receiving a COVID-19 vaccine?
Ven	
Ø №	
I have not y	et received the COVID-15 vaccine
8. Have you ev	er had a severe allergic reaction after receiving another vaccine or another injectable medication?
Yes	
0 No	
	PLEASE COMPLETE ALL FIELDS

The next screen is where you will finalize the booking of your appointment. You will need to select the date that you were give and the appropriate location. If you were given an access code but did not have to put it in on the first page you will enter it here. Once the appointment date, location, and access code (if required) are entered you will select the confirm button to complete the appointment scheduling.

Date *	
03/31/2021	
Location *	
	- MCA 2nd Dose (10-10:30am)
Access Code *	

If you do not click the confirm button and get a screen with a QR code and appointment details you do not have an appointment. For assistance completing this booking if you did not select a date and location but still have the QR code please call the GCHD phone bank at 409-938-7221 for assistance.

## If you are experiencing a life-threatening emergency, please call 911 You've been confirmed at MCA 1st Dose (3:30-4pm) on 03/31/2021. 9850 Emmett F Lowry Expressway Texas City, Tx Please save the QR Code by either screenshotting or printing it. WRITE DOWN YOUR APPOINTMENT INFORMATION. YOU WILL NOT RECEIVE A REMINDER. THANK YOU.

Thank you for taking the assessment. COVID-19 Vaccine is currently being distributed in a phased approach based on the recommendation of the Department of State Health Services and the Expert Vaccine Allocation Panel.

Your responses indicate you screened **Green** and are **currently eligible** to receive the COVID-19 Vaccine.