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## GUARDIAN AGENCY LETTER TO IMMUNIZER

Child Name:	CFS Guardian Agency:
Date of Birth:	CFS Authority:

Dear Immunizer,

This letter is to provide legal support for the above captioned child’s authorized consent for the COVID-19 vaccination. The above captioned family services agency is the legal guardian of the child in care in Manitoba and is under the age of 16. This letter provides legal consent on behalf of children in care.

I consent to the above-captioned child receiving a COVID-19 vaccination: The benefits and any anticipated side effects of the vaccination has been explained to me. I also consent to such additional or alternative treatment as immediately necessary as a result of receiving the vaccine.

I confirm that I have been provided information regarding the COVID-19 vaccine. I know about and understand the risks, benefits, and common side effects of this vaccine.

I understand this consent is for all doses of the vaccine, and I understand that my consent can be withdrawn at any time.

As the legal guardian to the above captioned child, I consent to the child receiving:

Either an MRNA or viral vector-based Health Canada approved COVID-19 vaccine (Depending which vaccines are available and approved for the child at the time of immunization).

Consent letter is valid for 6 months from date of signing.

Signed by legal decision maker:

Printed Name:	Signature of Guardian:	Date:
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