



# PARIS HIGH SCHOOL

14040 E. 1200th Rd.  
Paris IL, 61944  
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Dave Meister, Director  
Mark Cox, Asst. Principal  
Creighton Tarr, Athletic Director



## REQUEST FOR HIGH SCHOOL IMMUNIZATION RECORDS

Attn: Missy Tingley, RN

I am authorizing the release of my Paris High School Immunization Records.

Name (AT GRADUATION) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Year of Graduation \_\_\_\_\_

Year of Withdraw \_\_\_\_\_

Please release my Immunization Records to:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_