



**FAMILY HEALTH SERVICE  
DEPARTMENT OF HEALTH**

衛生署家庭健康服務

**Application for Replacement of Immunisation Record for Adults  
申請補領成人免疫接種記錄**

**Particulars of Applicant 申請人資料:**

Name:

姓名

English 英文

Chinese 中文

Hong Kong ID / Travel

Document no.:

身分證 / 旅遊證件號碼

Date of Birth:

出生日期

MCHC Record no.:

母嬰健康院記錄編號

Name of Centre:

健康院名稱

**Please read the following notes before you sign the application form:**

**簽署申請表格前，請先閱讀以下注意事項:**

1. The applicant needs to produce HKID card / Travel Document (either original or photocopy) for identity verification.  
申請人須提供身分證 / 旅遊證件 (正本或副本) 以核實身分。
2. You may be asked to provide additional information to help us meet your request. We may not be able to process your application if you do not provide sufficient information.  
你或需提供更多資料，以協助我們處理你的申請。如你未能提供足夠資料，我們可能無法進一步處理你的申請。
3. The information you provide will be used for processing your application for access to personal data. It may also be disclosed to other Government departments or agencies for the same purpose.  
你所提供的資料，將用於處理有關你申請索取個人資料的事宜上。你所提供的資料亦可能會交給其他政府部門或有關機構作同樣用途。
4. The duly completed application form with the relevant documents can be returned in person or by mail to the concerned Maternal and Child Health Centre (MCHC). For the address of MCHC, you may visit our website at [www.fhs.gov.hk](http://www.fhs.gov.hk).

請填妥申請表格，並連同有關文件正本或副本，以親身遞交或郵寄方式，交回所屬的母嬰健康院。有關母嬰健康院的地址，你可以瀏覽本署的網頁 [www.fhs.gov.hk](http://www.fhs.gov.hk)。

5. Upon notification, you may collect the document in person or authorise a representative to collect it on your behalf (on production of an authorisation letter (FHS123) and proof of the individual's identity e.g. Hong Kong identity card.). If the document is not collected **within 3 months** after the notification, the document will be destroyed without further notice.

收到本署通知後，申請人必須於**三個月內**親自或授權他人（代取人須出示授權書(FHS 123)及其身分證明文件，例如香港身分證）領取所申請的文件，否則文件將被銷毀。

6. Each person should hold ONE Immunisation Card only. Applicant should only apply for replacement of Immunisation Card when the original is lost. In case the original card is found after the replacement has been issued, the applicant should bring both the original and replacement cards back to the MCHC for further management.

每人只應持有一張免疫接種記錄（針卡）。申請人只應在遺失針卡正本後才可申請補領。如在獲發補領的針卡後尋回正本，申請人應將兩份記錄交回母嬰健康院處理。

7. Please make a copy of this application form for your personal keeping if necessary.

如有需要，請自行影印此申請表格，以作保管。

I have read and understood the above notes (please tick the box on the left).

我已閱讀並明白以上注意事項（請於方格內劃上「✓」號）。

I declare that my original Immunisation Card is lost.

本人聲明本人的免疫接種記錄（針卡）正本已遺失。

Signature of applicant:

申請人簽署

Date:

日期

Address:

地址

Contact telephone number:

聯絡電話

***To be completed by staff:***

**職員填寫**

Date of application received:	Name & Signature:
Date of notification:	Name & Signature:
Date of *completion / withdrawal:	Name & Signature: