

200 Piedmont Avenue, SE Atlanta, Georgia 30334

dph.ga.gov

## Georgia Registry of Immunization Transactions and Services (GRITS) Opt-In of Registry Form

Note: This form is required to allow a person who has previously opted out of the registry to opt back into the registry thereby allowing collection of immunization data on the person.

Name of Client:						
	Last		First		Middle	
Date of Birth:	MM/DD/YYYY		M/F or Unknow			
Name of Parent	or Guardian:	Last		First		Middle
Relation:	Mother'	s Maid	en Name:			
Telephone Num	ber: Area Code		umber			
Street Address: _						
City:		St	tate:	ZIP:		

I request this person be reinstated into Georgia Registry of Immunization Transaction and Services (GRITS). I understand this action will allow the state to add all immunization data on this persona from participating offices to the registry as a result of this action. The registry will be the official source of immunization history for this person.

The Opt-In Form will be maintained at the Georgia Immunization Office where it is available for review in accordance with OCGA sec. 31-12-3.1 and the Department of Public Health (DPH), Infectious Disease and Immunization Program (IDI) rules and regulations.

I understand immunization information may be added to the registry for this client until the Georgia Immunization Office receives a notification from the parent or legal guardian wishes to opt out of the registry. An Opt-out Form is available from the service provider through the GRITS online system. The Georgia Immunization Office must receive a completed Opt-out Form signed by a responsible person prior to changing the status of the individual named above.

Signature of Parent or Guardian

Date

Action to add a person into the registry can occur only after receipt and processing of this signed form. This form must be mailed to the following address:

GRITS OPT-IN DPH Immunization Office 200 Piedmont Avenue SE West tower Suite 1508 Atlanta, GA. 30334.