

KCH Covid-19 Vaccination Request Short Form
And Instructions

Now Vaccinating Everyone—16 Years and Up
***12– 15 Years: Pre-register Now (pending FDA Emergency Use Authorization)**

Please complete and submit the short form using the following instructions:

- 1) One form must be completed for each individual seeking to register for a vaccine.
- 2) Complete form on line, save a copy and submit the copy as an attachment to kchcovidvaccine@hsc.org. OR
- 3) Print a copy, complete the form manually then:
 - a. Drop it off at Kona Community Hospital or
 - b. Scan it and email it as an attachment to kchcovidvaccine@hsc.org (one form for each individual asking to be scheduled for the vaccine).

KCH schedulers will enter your information into the CDC’s registration website – the Vaccine Administration Management System (VAMS).

You’ll receive an email from the CDC, inviting you to complete your registration and schedule your vaccination appointment. The email will include a link to the Vaccine Administration Management System (VAMS).

The VAMS link will not work with Internet Explorer. You must use Chrome, Edge, Firefox or Safari.

You must use a unique e-mail account for your registration. You cannot use a shared e-mail account. This will cause problems trying to schedule your appointment.

On the day of your appointment, you will need:

- Government Issued Photo ID
- Health Insurance Card

We look forward to seeing you at one of our vaccination clinics.

~ Kona Community Hospital Staff

KCH Campus Clinic 79-1019 Haukapila St. Kealahou	Clinic hours of operation are subject to change based on volume. For appointments, please contact the KCH Call Center at (808) 322 4451 or KCHCOVIDvaccine@hsc.org
Kona Aquatic Center Gymnasium 75-5500 Kuakini Hwy Kailua-Kona	

Internal Use Only:
Date and time form received:

Kona Community Hospital
Covid-19 Vaccine Registration Short Form
Providing Pfizer Vaccines to Our Community

Please Print Clearly

Legal First Name:

Legal Middle Name:

Legal Last Name:

Date of Birth:

Unique Email:

Contact Phone Number: