

FAX or E-MAIL completed request form to:  
BarnesCare, (314) 747-6058  
Attn: Jane Myers, 5000 Manchester, St. Louis, MO 63110  
[Jane.myers@bjc.org](mailto:Jane.myers@bjc.org)



## ON-SITE FLU SHOT SCHEDULING REQUEST

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

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Major Intersections: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Number of Employees to Receive Shot: \_\_\_\_\_

Day of the Week Requested	Time Requested
First Preference:	
Second Preference:	
Third Preference:	

The price of the flu shot is \$25.00 each. A nurse's fee of \$75.00 per hour will be charged for times scheduled before 8:00 a.m. or after 4:30 p.m., on weekends, or if less than 20 employees per hour receive shots. A BarnesCare representative will contact you with the date and time scheduled for your company. If you need additional information, please call (314) 362-0639.

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*This section will be completed by a BarnesCare representative*

Date/Time Scheduled: \_\_\_\_\_

Notes: