



We provide quality pharmacy professionals.
100 E. Homer Adams Pkwy. Alton IL 62002 ph. 618.462.2484 fax 618.717.0145 www.metroph.com

Varicella Acknowledgement

I, _____, have had or have been told I have had
chickenpox (Varicella).

Signature of Contractor

Printed Name of Contractor

Social Security Number

Metro RPh
Agency

Date