

\$50

Be Rewarded™

Childhood Immunizations Reward

How to get a \$50 gift card

Return this voucher after your child receives all immunizations as recommended by the provider by 2 years of age. Child must be enrolled with South Country when they get their immunizations. Allow 4-6 weeks for delivery. Incomplete or ineligible vouchers will be denied.

A gift card will only be sent if this voucher is postmarked within 90 days of completing the immunizations.

1

This section **MUST** be completed.

The information is for the person who's having the immunizations.

Member's Name: _____ SCHL Member ID#: _____

Date of Birth: _____ Parent or Guardian's Phone #: _____

Mailing Address: _____

City: _____ State: _____ Zipcode: _____

2

Bring this voucher to your child's appointment.

A provider must complete and **sign** this section to be eligible.

Date the immunizations were completed: _____

Clinic Name: _____

Provider Name: _____ Provider Signature: _____

3

Place this completed voucher in an envelope and mail to South Country postmarked within 90 days.

South Country Health Alliance
Attn: Health Promotions
6380 West Frontage Road
Medford, MN 55049



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Questions? Call South Country Health Alliance Member Services

1-866-567-7242 ♦ TTY users call 1-800-627-3529 or 711

Hours of Service: 8 am to 4:30 pm, Monday - Friday

Email: members@mnscha.org Fax: 507-444-7774

Website: www.mnscha.org

Facebook Instagram

South Country Member Services 1-866-567-7242, TTY 1-800-627-3529 or 711

Attention: If you need free help interpreting this document, call the above number.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'ann ah ee tarjumaadda (afcelinta) qorallkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este document, llame al número indicado arriba.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.



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