**New York State Department of Health**

**Information Required for Children’s Camps to Access NYSIIS**

Public Health Law allows NYS Children’s Camps access to the [New York State Immunization Information System](http://www.health.ny.gov/prevention/immunization/information_system/) (NYSIIS) to obtain vaccination information for children attending camp. To access NYSIIS, each camp must obtain a NYSDOH Health Commerce System (HCS) account and designate an HCS Coordinator. The HCS Coordinator obtains and manages user accounts for camp staff on the HCS and is the principal point of contact concerning HCS access.

Non-medical professionals designated as the camp HCS Coordinator must submit the following information to the [local health department](http://www.health.ny.gov/environmental/water/drinking/doh_pub_contacts_map.htm) that has jurisdiction in the county the camp is located. Following the submittal of this form, additional instructions will be provided directly from the HCS for account access. Medical professionals can apply for a HCS account online at <https://apps.health.ny.gov/pub/top.html>.

**Children’s Camp Facility Information:**

|  |  |
| --- | --- |
| DOH Operation ID Number\* |  |
| Children’s Camp Name |  |
| Camp Address |  |
| County where Camp is Located |  |

**\*** Operation ID Number may be listed at the bottom of the camp’s DOH permit or obtained from your [local health department](http://www.health.ny.gov/environmental/water/drinking/doh_pub_contacts_map.htm).

**Children’s Camp Owner or Operator Information:**

|  |  |
| --- | --- |
| Name (full first, middle and last name) |  |
| Month and Day of Birth (do not need the year) |  |
| Job Title |  |
| Telephone Number at Camp |  |
| FAX Number |  |
| E-mail Address |  |

**HCS Coordinator Information:**

|  |  |
| --- | --- |
| Name (full first, middle and last name) |  |
| Month and Day of Birth (do not need the year) |  |
| Job Title |  |
| Telephone Number at Camp |  |
| FAX Number |  |
| E-mail Address |  |

**Local Health Department use only.** Please verify the children’s camp is regulated by your office, complete the information below, and submit this form to the BCEHFP at [bcehfp@health.ny.gov](mailto:bcehfp@health.ny.gov) or fax to

518-402-7609 (Subject: Camps - NYSIIS Access).

The children’s camp specified above is regulated by your office.  Yes

LHD: Date:

Verified by:

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