



https://www.mass.gov/covid-19-vaccine

Pre-registration Form for MA COVID-19 Vaccines

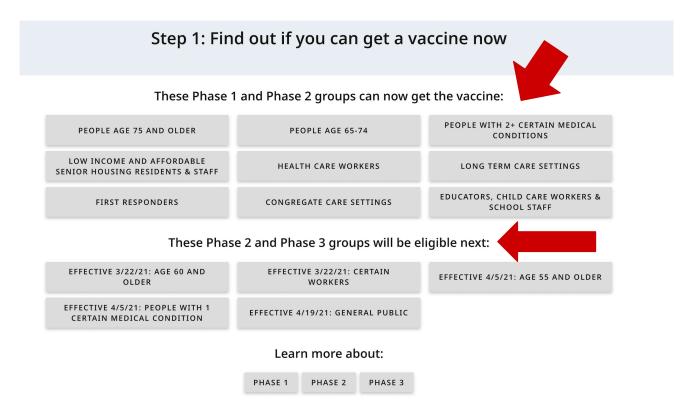
This website will help you pre-register for your COVID-19 vaccines. People who live, work, or study in Massachusetts can pre-register for a COVID-19 vaccine appointment at the following mass vaccination locations: Fenway Park, Gillette Stadium, Reggie Lewis Center, DoubleTree Hotel-Danvers, Eastfield Mall-Springfield, Natick Mall, former Circuit City-Dartmouth.

Instructions

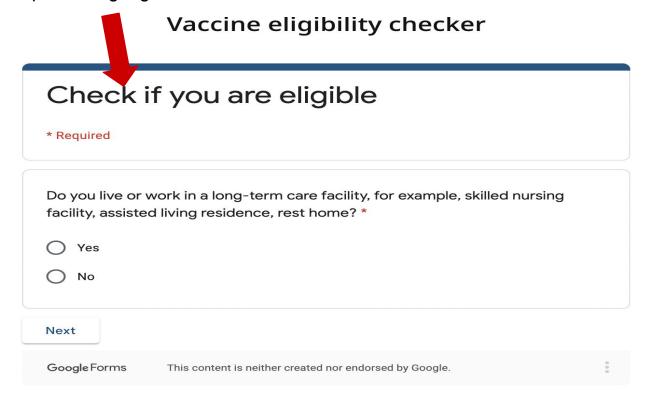
- Log onto https://www.mass.gov/covid-19-vaccine
- You'll be brought to this page:



Half way through the page, you can to click the option(s) that describe you.



- Keep scrolling and you will find
- "Vaccine eligibility checker"
- If you wish to find out if you are currently eligible to get the Vaccine, you can complete the google form.



- To pre-register for the COVID-19 vaccine, which is at the top of the page, is this box
- It says "PRE-REGISTER AT VACCINESIGNUP.MASS.GOV" click on it

Massachusetts is vaccinating against COVID-19

Vaccine supply is very limited

People who live, work, or study in Massachusetts can preregister for a COVID-19 vaccine appointment at a **mass vaccination location:** Fenway Park, Gillette Stadium, Reggie Lewis Center, DoubleTree Hotel-Danvers, Eastfield Mall-Springfield, Natick Mall, former Circuit City-Dartmouth.

PREREGISTER AT VACCINESIGNUP.MASS.GOV

And the location of the vaccines are here

This will be the screen that pops up when you click to PREREGISTER



Language English **→**

Preregistration Form for Massachusetts COVID-19 Vaccines at Mass Vaccination Locations

How It Works:

- Fill out this form to preregister for a vaccine appointment at a mass vaccination location. Preregistration is only available for mass vaccination locations.
- After you preregister, you will receive weekly status updates on your preferred contact method. If you get an appointment somewhere else, please remove your name from the preregistration list by replying to these updates.
- We will contact you when there are appointments available for you and provide you with a link to use to select and book your appointment.

Massachusetts receives a limited supply of COVID-19 vaccine doses from the federal government each week. Due to high demand and very limited supply, there are a limited number of appointments available for eligible people at this time.

Please note that per CDC Guidance, we ask that individuals with allergies work directly with their healthcare provider to get vaccinated.

Read about the vaccination plan in Massachusetts:

- Check if you have a certain medical condition
- Use this list of workers to find out which group you are in
- Read more information <u>about the mass vaccination locations</u>

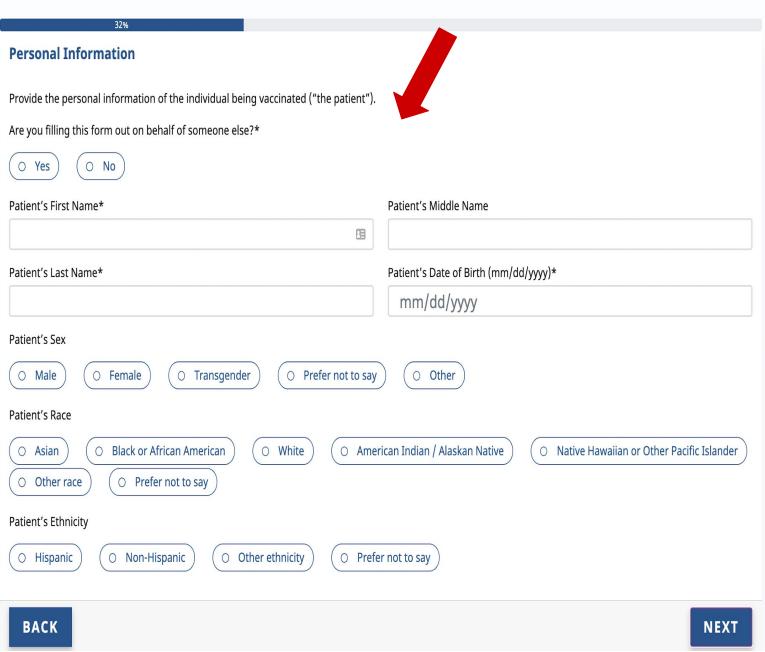
You can read through these facts if you want to

Then click next



• Complete this form:

Preregistration Form for Massachusetts COVID-19 Vaccines at Mass Vaccination Locations



then click next



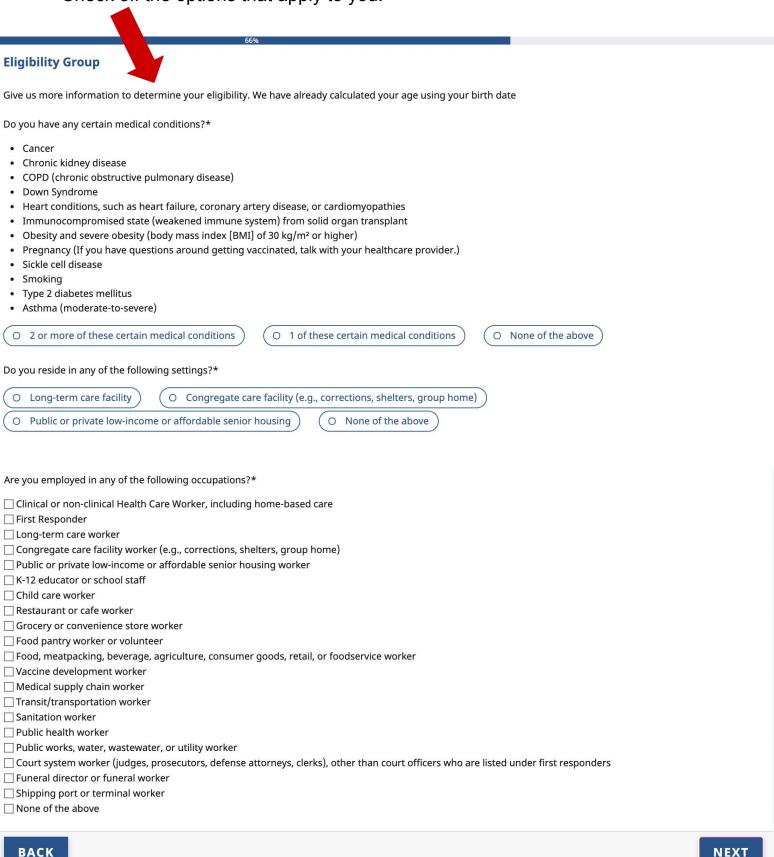
• Complete the following information:

Preregistration Form for ssachusetts COVID-19 Vaccines at Mass Vaccination Locations

50%		
Address and Contact Information		
By providing this information, you agree to be contacted by the Commonwealth of Nopportunity to book your vaccine appointment.	Massachusetts about your preregistration status and notified when you have an	
What is your address?		
Street Address	City	
State	ZIP Code*	
·		
Preferred Contact Method*		
O Email O Text Message O Phone Call		
Email	Confirm Email	
Phone*	Confirm Phone*	
Language preference for communications O Arabic O Cape Verdean O Chinese O English O French O Haitian Creole O Khmer (Cambodian) O Portuguese O Russian O Spanish O Vietnamese O Other Would you like assistance over the phone when it is time to book your appointment?*		
ВАСК	NEXT	

then click next

Check off the options that apply to you:



1

• Check the boxes and enter your name:

Preregistration for Massachusetts COVID-19 Vaccines at Mass Vaccination Locations

100%			
Attestation			
Select all options to attest:			
☐ I hereby attest under the penalties of perjury to the best of my knowledge and belief that the person being vaccinated meets the eligibility criteria that I entered above.* ☐ I hereby attest under penalties of perjury that the person being vaccinated lives, works, or studies in Massachusetts.*			
First Name*	Middle Name	Last Name*	
B			
ВАСК		SUBMIT	

then click submit