# COVID-19 Vaccine Registration System

## Step 1 – Create your Everbridge account

**Here's what you'll need to create an account.**

- First and last name.
- Username
  - It must include at least four acceptable characters such as uppercase and lowercase letters, numbers, period, dash, underscore and a symbol.
  - If you already have an Everbridge account, you must create a different username, as this is separate from the Alert Sarasota County emergency notification system.
- **Password.** Must be at least 12 characters long and include at least one uppercase letter, one lowercase letter, one special character ! @ # $ % ^ & * ( ) and one number.
- **Security question and answer.** Select one question from the following and prepare your answer. Please save your question and answer in a secure place as you would need this to use the "forgot my password" tool.

- **What is the city or town of your birth?**
- **What is the city or town where your mother and father met?**
- **What is the city or town where you met your spouse/significant other?**
- **What school did you attend in sixth grade?**
- **What street did you live on in third grade?**
- **What was the last name of your favorite teacher?**

- **What is your maternal grandmother's maiden name?**
- **What is the name of your favorite childhood friend?**
- **Where was your first job?**
- **What was your childhood nickname?**
- **What was the name of your favorite pet or stuffed animal?**

- **Location information.**
  - Location name (ex: home, work)
  - Address (street number and name) – click "Verify This Address." On next page if address is correct, click "This is My Location."

- **Contact information.** Enter at least one of the following:
  - Email address.
  - Primary text.
  - Primary mobile.

# COVID-19 Vaccines

**Department of Health in Sarasota County Official Registration System**

## Step 2 – Complete Profile

**Profile information:** Once your account is created, you can complete the registration. Some information from the previous screen is auto filled here – review and confirm for correctness:

- Registration Email (Optional) – while optional adding an email here allows you to use the Forgot Username and Forgot Password features should you need them.

- **Time zone. This can be skipped.**

- At least one additional contact information method besides the one provided in account creation (primary mobile, primary text, primary email, home phone, business phone or TTY/TTD). Phone numbers can be entered without formatting – the system will format. Ex. 9415551234.

- Click Save & Continue

**Location information:** There is no need to add another address. Click Save & Continue.

**Additional information:** Complete the following fields. Bolded items are required.

- **Date of Birth (mm/dd/yyyy)**

- **Age**

- **Sex**

- **Race**

- **Ethnicity**

- **Are you a frontline healthcare worker?**

- Job Title (if yes to healthcare worker)

- **FL County of Residence**

- **Have a second person age 65+ to register? (second person must be able to attend same appointment date/time)**
    - **First name of second person 65+**
    - **Last name of second person 65+**
    - **Date of birth of second person (mm/dd/yyyy)**
    - **Age of second person 65+**
    - **Sex of second person age 65+**
    - **Race of second person age 65+**
    - **Ethnicity of second person age 65+**

- **Preferred Appointment Time**

- Shaded fields apply only to staff and may be disregarded. Information will display as notifications are sent and information is received (registration number, first dose appointment selection, date first dose administered, second dose appointment selection, date second dose administered).

**It's highly recommended that you send yourself a test notification after you complete registration. This option is available at the end of registration.**

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Florida HEALTH Sarasota County

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