

Immunization Program

April 2026

Schedule is subject to change

Free childhood immunizations

INSIDE of facility

6 weeks-18 years of age


Immunization record required

504.733.3268

CHGNOIN@LCMCHealth.org

WEBSITE:

manningchildrens.org/immunization

| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|----------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------|------------------------------------------------------------------|
| 29 | 30 PRIVATE EVENT | 31 PRIVATE EVENT | 1 PRIVATE EVENT | 2 Stallings Claude Recreation Center 4300 St. Claude Ave. 1:00P-5:00P | 3 | 4 |
| 5  | 6 | 7 Kenner Hispanic Apostolate 2525 Maine Ave 1:30P – 5:30P | 8 | 9 Ministerios Bethania 1152 Terry Pkwy 1:30-4:30pm | 10 | 11 |
| 12 | 13 | 14 PRIVATE EVENT | 15 PRIVATE EVENT | 16 Joe Brown Park 5601 Read Blvd 1:00P-5:00P | 17 | 18 ThriveKids Comm. Clinic 12000 Hayne Blvd 9:00A-1:00P |
| 19 | 20 Hispanic Resource Center 4312 Florida Ave 12:30P – 4:00P | 21 Algiers Regional Library 3014 Holiday Dr 1:30P-4:30P | 22 Nora Navra Library 1902 St Bernard Ave 1:00P-4:00P | 23 PRIVATE EVENT | 24 | Appt Preferred/Walk-ins as available |
| 26 | 27 MLK Center 1042 31 st St Kenner 12:30P – 4:00P | 28 | 29 PRIVATE EVENT | 30 PRIVATE EVENT | 1 PRIVATE EVENT | 2 |

Due to high volumes at some locations, sign-in times will end once we meet capacity.

If your child is new to the state of Louisiana, you must submit all required documents before being seen. This can be done through our website or email provided above.

Required Information for the Child (Patient)

Birth certificate or passport | Immunization record (if applicable) | First and last name | Date of birth | Sex | Race | Home address | Phone Number

Required Information for the Legal Guardian

First and last name | Date of birth

