

Immunization Waiver Form

I hereby request the exemption of _____

Name of Child

from the immunization requirement for Faith Adventure Camp entry because all or some of the standard childhood immunizations (including the influenza vaccine) are contrary to my personal belief. I understand that in the event of an outbreak of any of these diseases my child may be excluded from camp activities for his/her protection and I will not hold the board members of Faith Adventure Camp or Mountain Meadow Ranch liable in the event my child contracts one of these diseases.

Parent Signature

Date