(C	urrent Date)
(H	ealth Department Director)
	ame of Health Department)
(H	ealth Department Address)
(C	ity, State, Zip)
REF: Submission for Religious Exe	emption from Vaccination for:
(Child's name, Birthdate)	
Dear Director:	
I,, a	as the parent of the above named child am exercising my rights under the First
Amendment of the US Constitution	and Alabama Government Code Section 16-30-3 to receive Religious Exemption from
Vaccinations.	
I am fully aware of the alleged risk	s of not vaccinating as described by the Centers for Disease Control, The American
Academy of Pediatrics, and the Am	nerican Medical Association.
However, I now have sincere religi	ous beliefs that prohibit us from submitting to and receiving vaccinating agents.
In addition, I further request a letter	r to "School Administrators" resolving its failure to include the legal rights of a parent
or student to a religious exemption	as outlined in the Alabama Government Code Section 16-30-3. I will seek legal action
if, due to the failure on the part of t	he State of Alabama to recognize these rights, if my child is not admitted to a Alabama
school or daycare.	
If the Alabama Certificate of Religa of appointment, with five working	ious Exemption must be signed at the Health Department, please provide a written notice days advance response permitted.
Respectfully,	
Parent Name	_
Address	
City, State, Zip	<u> </u>

Alabama Government Code Section 16-30-3

Exceptions to chapter.

The provisions of this chapter shall not apply if:

(1) In the absence of an epidemic or immediate threat thereof, the parent or guardian of the child shall object thereto in writing on grounds that such immunization or testing conflicts with his religious tenets and practices; or

(2) Certification by a competent medical authority providing individual exemption from the required immunization or testing is presented the admissions officer of the school.

(Acts 1973, No. 1269, p. 2113, §§3.)