

Pleasant View Christian School
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“Train up a child in the way he should go...” – Proverbs 22:6a

Vaccine Refusal Form

In accordance with Indiana Code #20-8.1-7-9.5 section 2a, I certify that the administration of vaccine & other immunizing agents to my child, _____, (name of child) is contrary to both _____ & my personal religious beliefs, held either individually or jointly with others, and I therefore request that my child be exempt from the immunization requirements of the Indiana State Statute 9.5.

Named immunizations:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Signature of Father/Male Legal Guardian: _____
Signature of Mother/Female Legal Guardian: _____
Date: _____

IC 20-8.1-7-2 Religious objection

Sec. 2. (a) Except as otherwise provided, a school child may not be required to undergo any testing, examination, immunization, or treatment required under this chapter when the child's parent objects on religious grounds. A religious objection does not exempt a child from any testing, examination, immunization, or treatment required under this chapter unless the objection is:

- (1) made in writing;
- (2) signed by the child's parent; and
- (3) delivered to the child's teacher or to the individual who might order a test, an exam, an immunization, or a treatment absent the objection.

(Formerly: Acts 1973, P.L.218, SEC.1.) As amended by Acts 1976, P.L.103, SEC.1; P.L.192-1993, SEC.1.