



## New Hampshire Childcare/School Immunization Religious Exemption Form

### Instructions:

Parent/ legal guardian or student (if the student is 18 years of age or older):

- Complete form, sign, and date.
- Maintain a copy of this form for your records.
- Submit this completed form to each childcare/school your child attends.

**NOTE:** Parent/legal guardian or student (if the student is 18 years of age or older) is responsible for providing a copy of this form to each childcare agency or school attended as the form does not automatically transfer to an additional childcare agency or school

|                |               |             |       |
|----------------|---------------|-------------|-------|
| Student's Name | Date of Birth | Grade/Level |       |
| Street Address | City          | Zip Code    | Phone |

The administration of immunizing agents conflict with the religious beliefs of the parent or legal guardian of the student listed above. Pursuant to NH Statute RSA 141-C:20-d, I understand, in the event of an outbreak of vaccine-preventable disease, for which an immunization is required, an exempt student shall be excluded from school attendance.

### Please specify vaccine(s) for which this exemption applies (optional):

(This information is voluntary and if you choose not to provide the requested information, it will not impact religious exemption.)

☐ DTaP/Tdap/Td   ☐ Polio   ☐ Hepatitis B   ☐ Hib   ☐ MMR   ☐ Varicella

\_\_\_\_\_  
Printed name of Signature of Parent/Guardian or Student (if student is 18+)

\_\_\_\_\_  
Signature of Parent/Guardian or Student (if student is 18+)

\_\_\_\_\_  
Date