



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 your request for a 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