

IMMUNIZATION HISTORY:

Dear Parent(s)/Gaurdian(s):

Per American Camp Association (ACA) Health Screenings and Assessments Mandates we are required to obtain the following:

- 1. A STATEMENT attesting that all immunizations required for school are up to date and the actual date (month/year) of last tetanus shot."

OR

- 2. Per American Camp Association (ACA), "if camps have minors who do not have immunizations, for religious or other reasons, a "record" can be a signed refusal or a signed waiver form.

Please fill in the appropriate information below and sign.

STATEMENT OF CURRENT IMMUNIZATIONS:

I _____, parent/guardian of, _____, attest that my child is up to date on all immunizations required for school. I further attest that my child’s last tetanus shot was on _____ / _____ (MONTH/YEAR).

PARENT/LEGAL GUARDIAN SIGNATURE: _____

DATE: _____

IMMUNIZATION WAIVER:

PERSONAL BELIEFS AFFIDAVIT TO BE SIGNED BY PARENT OR GUARDIAN—I hereby request exemption of my child, _____, from the immunization requirements for school/child care entry because all or some immunizations are contrary to my beliefs. I understand that in case of an outbreak of any one of these diseases, the child may be temporarily excluded from attending for his/her protection.

PARENT/LEGAL GUARDIAN SIGNATURE: _____

DATE: _____