

# Minnesota Conscientious Exemption to Vaccination

\_\_\_\_\_, as the Parent(s) of \_\_\_\_\_

are exercising our rights under the First Amendment of the United States Constitution and Minnesota Statutes: 121A.15 Health Standards; Immunizations; School Children; Subd. 3 (d) to file a Religious/Conscientious Exemption to all vaccinations.

Respectfully,

Parent(s) Signature (s) \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Notarized:

State of \_\_\_\_\_, \_\_\_\_\_ County

I, \_\_\_\_\_, a Notary Public for said County and State, do hereby certify that \_\_\_\_\_

personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Notary Signature: \_\_\_\_\_



Vaccine Safety Council  
*of Minnesota*

<http://vaccinesafetycouncilminnesota.org/> [info@vaccinesafetycouncilminnesota.org](mailto:info@vaccinesafetycouncilminnesota.org)