511-2-2-.07 Religious Objections to Required Immunizations

- (1) Except as provided in subsection (2) below, a child shall be exempt from the required immunizations if the parent or legal guardian has filed with the school or childcare facility a completed affidavit on DPH Form 2208.
- (2) When the Department or a County Board of Health determines that an epidemic or the threat of an epidemic exists, the Department or Board shall immediately notify the governing authorities of all schools and childcare facilities within the affected area. Under those circumstances, the Department or Board may require immunization for those who object on the grounds of religious beliefs, and may prohibit attendance at schools or childcare facilities within the area by unimmunized children.
- (3) Persons who wish to register a religious objection to the vaccination of their child shall do so using the following DPH Form 2208:

		_ personally appeared before the
undersigned notary public and swore or affirmed as follows:		
1	I am the parent or legal guardian of	
1	Child	l's Name
2	I understand that the Georgia Department of Public Health requires children to obtain The following vaccinations before being admitted to a childcare facility or school: diphtheria; haemophilus influenzae type B (not required on or after the fifth birthday); hepatitis A; hepatitis B; measles; meningitis; mumps; pertussis (whooping cough); pneumococcal (not required on or after the fifth birthday); poliomyelitis; rubella (German measles); tetanus; and varicella (chickenpox).	
3	I understand that the Georgia Department of Public vaccinations are necessary to prevent the spread of children and people of this State; that the required who does not receive these vaccinations is at risk of that a child who does not receive those vaccinations diseases to me, to other children in the childcare face	dangerous diseases among the vaccinations are safe; that a child fontracting those diseases; and s at risk of spreading those
4	I sincerely affirm that vaccination is contrary to my religious beliefs, and that my objections to vaccination are not based solely on grounds of personal philosophy or inconvenience.	
5	I understand that, notwithstanding my religious objections, my child may be excluded from childcare facilities or schools during an epidemic or threatened epidemic of any disease preventable by a vaccination required by the Georgia Department of Public Health, and that my child may be required to receive a vaccination in the event that such a disease is in epidemic stages.	
	State of Georgia	County of Spalding
I,		_, a Notary Public for said county and
state, do hereby certify that personally appeared before me this day acknowledge the due executing of the foregoing instrument.		
Witness	s my hand official seal, this is the day of	, 20
My commission expires		
Signature of Notary Public:		



Board Members
Barbara Jo Cook
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