



Request for Covid-19 Vaccine Religious Exemption

Student's Name _____ Date of Birth (MM/DD/YY): ____/____/____

Request for Religious Exemption

I request that the above-named student be exempt from Mathcamp's Covid-19 vaccination requirements, based on religious grounds.

1. Please describe the nature of your objection to the COVID-19 vaccination requirement.

2. Would complying with the COVID-19 vaccination requirement substantially burden your religious exercise or conflict with your sincerely held religious beliefs, practices, or observances? If so, please explain how.

3. Please provide any additional information that you think may be helpful in reviewing your request. For example:
 - How long you have held the religious belief underlying your objection
 - Whether your religious objection is to the use of all vaccines, Covid-19 vaccines, a specific type of Covid-19 vaccine, or some other subset of vaccines
 - Whether the student has received vaccines against any other diseases (such as a flu vaccine or a tetanus vaccine)



Assumption of Risk and Agreement to Depart In Case of Outbreak

I agree that in the event of an outbreak of Covid-19 within Mathcamp, the student will (at their own expense) leave campus.

Signatures

Parent/Guardian: By signing below, I acknowledge that I fully understand the risks associated with participation in Mathcamp without being vaccinated against Covid-19, and the consequences of signing this Request for Exemption from Covid-19 Vaccine.

Name of Parent/Guardian

Signature of Parent/Guardian

Date

Student: By signing below, I acknowledge that I fully understand the risks associated with participation in Mathcamp without being vaccinated against Covid-19, and the consequences of signing this Request for Exemption from Covid-19 Vaccine.

Name of Student

Signature of Student

Date