



**Blanchester Local Schools
Office of the District Nurse**

957 Cherry Street, Blanchester, Ohio 45107
Putman Elementary School 937-783-2681 Blanchester Middle School 937-783-3642
Blanchester High School 937-783-2461

EXEMPTION FROM IMMUNIZATIONS

My child, _____ is to be exempt from

- all of the required/recommended immunizations, or
- the following specified required/recommended immunizations.
Please specify the exempted immunization(s): _____

My child will be exempted from immunizations for the following reasons:

_____ Religious convictions

_____ Other (please explain):

I am aware of the potential consequences associated with this exemption from required/recommended immunization, and I accept all risks.

Parent/Guardian signature for immunization exemption:

Date:
