

**AFFIDAVIT OF Proof of IMMUNITY
EXEMPTION ON RELIGIOUS GROUNDS FROM EUA
Inoculation & MANDATES**

Date: ____/____/20____

Governing Authority Name (business issuing mandate): _____
Address: _____

RE: Religious Exemption from Immunization Requirements

I, (Name) _____, the undersigned do hereby swear and affirm that I am a member of a recognized religious organization, and that the immunizations required by (Governing Authority Name) _____, are contrary to my religious tenets and practices. On this basis, as the above referenced EUA COVID19 inoculations/immunization requirements violate my right to freely exercise my religion as guaranteed by the First Amendment of the Constitution of The United States of America, I am asserting my rights to an exemption by (Governing Authority Name) _____ from EUA Inoculation and nasal Swab PCR test requirements as I am immunized/vaccinated by virtue of the robust natural immunity I acquired when I recovered from COVID19.

I also am immunized/vaccinated according to my religious beliefs as I regularly take oral booster vaccinations. My immunization strategy **exceeds** FDA and CDC mandated standards, which were recently changed such that the vaccination need not provide immunity only *reduction of* COVID symptoms.

I qualify for this exemption based on the First Amendment of the United States Constitution and *42 U.S. Code § 2000a - Prohibition against discrimination or segregation in places of public accommodation*, which states "All persons shall be entitled to the full and equal enjoyment of the goods, services, facilities, privileges, advantages, and accommodations of any place of public accommodation, as defined in this section, without discrimination or segregation on the ground of race, color, religion, or national origin." Failure to uphold 42 U.S. Code § 2000a may be met with legal action.

Thank you in advance,

[Name]

[Signature]

-----**Notarial Certificate – To be filled out by a notary public**-----

State of _____
County of _____

On _____ before me, _____ (here insert name and title of the officer), personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)