

Refusal Of Vaccinations

Under the **International Declaration of Human Rights** no medical treatment can be given without the **free, informed** consent of the treated person.

Article 5 of the Universal Declaration of Human Rights [1948] is enshrined in Article 7 of the International Covenant on Civil and Political Rights (1966) <https://www.ohchr.org/EN/ProfessionalInterest/Pages/CCPR.aspx.org/wp-content/uploads/1984/07/Siracusa-principles-ICCPR-legalsubmission-1985-eng.pdf>

This letter is to inform you that we, the parents, **DO NOT CONSENT** to any of the following medical treatments for our son/daughter –

1. COVID-19 Vaccines (mRNA injections cause death and disability – see <https://howbad.info>)
2. Any other vaccines (mRNA injections cause death and disability – see <https://howbad.info>)
3. PCR tests (can damage nasal passage)
4. Detention / Quarantine
5. Wearing a mask
6. Social Distancing

We **do not consent** to vaccines for our child, and he/she does not consent to them. This applies to **any** vaccines given in **any** format. Criminal coercion may not be used to persuade our son/daughter to accept a vaccine under **any** circumstances. He/she understands the risks of vaccinations, and chooses **not** to receive them. Failure to abide by this will be considered as criminal assault and you will be held liable in your private capacity. Our son/daughter will carry a copy of this letter at all times on his/her person.

Yours sincerely,

[First name of Parent].....

[Surname of Parent].....

Autographed:.....Date:

I, [Name of Son/Daughter].....

do not consent to receiving vaccinations, covid testing or wearing a mask. I understand the risks. If I am vaccinated or tested or forced to wear a mask it will have been fully under duress, and a criminal activity.

Autographed:..... Date:

We require a reply within 7 days and confirm the acceptance of our terms. If you do not reply, we will take that as tacit agreement to our terms.