



Vaccine Waiver

Parent/Guardian Name: _____

Parent/Guardian Name: _____

Student Name: _____

The influenza vaccine is offered free of charge each winter (between late-October and March) to all students in Alberta. Golden Hills International recommends that all students receive the influenza vaccine but recognizes that parents will continue to have the final decision on immunizing their child.

Yes, I/we authorize my/our child to receive the influenza vaccine while in Canada.

No, I/we do not authorize my/our child to receive the influenza vaccine while in Canada.

As the parent(s)/guardian(s) of the student mentioned above, I/we understand the risks involved in receiving this vaccination and absolve Golden Hills International and Golden Hills School Division of any liability. This waiver only grants permission and is not a guarantee that a vaccination will occur.

The following pertains to vaccine-preventable diseases. **Please read carefully.**

If a highly contagious vaccine-preventable disease, such as measles, occurs at school, a student who is not vaccinated may be excluded from school. Golden Hills will not be responsible for this missed time nor will refunds be issued.

If a student contracts a highly contagious vaccine-preventable disease, Golden Hills will not put the homestay family or dormitory staff and students at risk, and the student may be returned home at the parents' expense.

By signing below, I agree that I have read and understand the Vaccine Waiver.

Parent/Guardian Signature

Parent/Guardian Signature (if applicable)

Date

Date