

Appendix D-7 Health Examination Exemption

Student: _____

School Year: _____

I wish to comply with the law by citing Article XLV, Sch.1419 of the Public School Code of 1949.

I object to having my well child examined by a medical doctor having convictions as strong as a religious belief.

As parents we take full responsibility for our child's health and welfare, releasing the school district of any liability.

Date: _____
