

Head teachers name
School name
School address

Your name
Your address

Date

Dear Sirs,

[Your child's name] year [xx]

The flu nasal vaccine is to be given to all school children this September. Accordingly this letter is to formally and unequivocally withdraw my consent for you to vaccinate [your child's name].

If Gillick competence applies include the next paragraph. If it does not, remove the next paragraph. In all cases remove this paragraph that is in red.

My daughter/son is at the age where s/he could be considered Gillick competent. Given this I have discussed the risks and benefits of the nasal flu vaccine with her/him and s/he declines informed consent to receive the same. Consequently my daughter/son has signed this letter to also refuse the vaccine.

Recent research suggests that the flu vaccine "may not work as well as previously thought", (1), and further the vaccine has been shown to cause a wide array of negative and serious health effects, including Guillain-Barré syndrome, narcolepsy and Oculo-respiratory syndrome. (2), (3) (4). Given this, I am concerned that the risks from the vaccine outweigh the risk to [your child's name], a healthy child, from the flu itself.

Please include the paragraphs below only if you intend to take your child out of school for the shedding period and in all cases remove this paragraph that is in red.

Given the shedding from the vaccine, a further well documented risk (5), this letter is also to inform you that to protect [your child's name], s/he will not be in attendance at school on vaccination days and for 2 weeks following the last day that the school administers the vaccine, to ensure that her/his health is not adversely affected by dissemination of particles from a vaccinated child. Given this, I would be grateful if you could supply 2 weeks of class work for [your child's name] to carry out at home, and I will ensure that this is completed.

Given that the school has decided to administer the nasal vaccine in a non clinical setting en masse, and my grave concerns as to the health of [your child's name] from shedding, you will appreciate that I do not expect any penalty for keeping [your child's name] away from school for the two week shedding period, and I reserve my right to take independent legal advice about the same should I receive notification of a penalty.

Please place a copy of this letter in my child's school record.

Yours sincerely,

Your name

Childs signature here

Childs name here

(1)

<https://www.science.org/content/article/why-flu-vaccines-so-often-fail>

(2) <https://www.sciencedirect.com/science/article/pii/S0264410X20304023>

(3) <https://jamanetwork.com/journals/jama/article-abstract/199859>

(4) <https://www.sciencedirect.com/science/article/abs/pii/S0264410X03000951>

(5) <https://onlinelibrary.wiley.com/doi/full/10.1111/irv.13149>