



STATEMENT OF CREED/RELIGIOUS BELIEF

Mandatory Vaccination for Scouts Canada

SECTION 1: REQUESTER INFORMATION (WHO THE EXEMPTION IS FOR)

Last Name:

First Name:

Group / Summer Camp Name:

MyScouts Member ID:

Unit
Number:

Street
Number:

Street Name:

P.O.
Box:

City/Town:

Province/State:

Country:

Postal Code:

SECTION 2: PARENT/LEGAL GUARDIAN INFORMATION (FOR INDIVIDUALS UNDER 18 YEARS OF AGE)

Last Name:

First Name:

Telephone Number:

Email Address:

SECTION 3: DECLARATION OF REQUESTER

Please explain within the text box below or by way of an attached letter why you are unable to be vaccinated due to your religion/creed. Please ensure you provide background on your religious belief/creed and connect the religious belief/creed to the reason you are requesting an exemption. If possible, please provide supporting documentation published by religious leaders or others practicing your religion/creed.

SECTION 4: DECLARATION OF RELIGIOUS LEADER OR WITNESS

I, _____ (Name of religious leader, parent, or guardian)
certify that, due to a religious belief and/or creed, the named person should be exempted from the requirements of Scouts Canada for persons attending Scouting activities, events or properties (owned or leased) to be vaccinated against COVID-19 with a Health Canada-approved vaccine.

Please state the reason(s) for the accommodation request here. (Please describe the religious belief(s) and/or creed(s) that preclude the person from being vaccinated.):

SECTION 5: SIGNATURE OF RELIGIOUS LEADER OR WITNESS

Name of Religious Leader or Witness:

Business Address	Unit Number:	Street Number:		
Street Name:			P.O. Box:	
City/Town:	Province/State:	Country:	Postal Code:	
Signature of Religious Leader or Witness:				Date:

SECTION 6: IMPORTANT INFORMATION (PLEASE READ)

Scouts Canada requires that all members attending Scouting activities, events or properties (owned or Leased) be vaccinated against COVID-19 unless they have a valid exemption.

In order to receive a valid exemption for non-medical reasons, the person (or their parent or legal guardian if the person is under the age of 18) must complete this Statement of Creed/Religious Belief form with their religious leader.

Risks of not being vaccinated:

You may be more likely to be exposed to the COVID-19 virus than others if you live in a group setting or participate in group activities in closed/crowded spaces where the COVID-19 virus may transmit more easily.

COVID-19 can result in severe illness. Those who are at particular risk of developing more severe disease or outcomes from COVID-19 are people:

- who are an older adult (increasing risk with each decade, especially over 60 years)
- of any age with chronic medical conditions, including: lung disease, heart disease, high blood pressure, diabetes, kidney disease, liver disease, dementia, or stroke
- of any age who are immunocompromised, including those with an underlying medical condition, such as cancer or those taking medications which lower the immune system, such as chemotherapy
- living with obesity, such as having a body mass index (BMI) of 40 or higher

Vaccination is one of the most effective ways to protect our families, communities and ourselves against COVID-19. Evidence indicates that vaccines are effective at preventing serious outcomes, such as severe illness, hospitalization and death due to COVID-19. A growing body of evidence indicates that people fully vaccinated with an mRNA vaccine (Pfizer-BioNTech and Moderna) are less likely to have asymptomatic infection or to transmit COVID-19 to others.

Sources: canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html#vaccination

I, _____ am a person who wishes to attend Scouts Canada activities or events and make oath or solemnly affirm and say as follows:

1. The requirements of Scouts Canada's vaccination policy for persons attending Scouting activities, events or properties (owned or leased) conflict with my sincerely held convictions based on my creed/religion.
2. I understand that should an outbreak occur, my Public Health Unit or Scouts Canada may impose additional restrictions or requirements on me/my child for health and safety reasons which may not apply to others at Scouting activities, events or properties (owned or leased who have been fully vaccinated).
3. I understand that Scouts Canada may require me/my child to follow additional health and safety protocols, including, but not limited to:
 - a. Mandatory COVID testing and disclosure of test results
 - b. Masking and/or physical distancing; and/or
 - c. Remote working/learning.
4. I request that I/my child be exempted from the vaccination requirements of Scouts Canada.

SECTION 7: SIGNATURE OF REQUESTER & WITNESS

REQUESTER/PARENT/LEGAL GUARDIAN

Print:

Signature:

Date:

WITNESS

Print:

Signature:

Date: