

**Statement of Declination for Offer of Vaccine Product**

1. **I (YOUR NAME)**, a living (**FILL IN SEX HERE**) retain and reserve all my God-given rights including sole possession and sole use of all my biological materials which are granted to me by my Creator.

My employer (**EMPLOYER NAME**) and location of employment have offered a vaccination product to me.

I retain the right to decline all attempts to access, influence and or otherwise alter any and all of my God-given biological material and or biological systems which are unique, flawless and original design and craftsmanship of my Creator and of which my Creator has granted me sole possession, proprietorship and use of.

I require that any and all products offered to me by my employer or workplace be both entirely retrievable from and also removable in their entirety from my body, person, and (**FILL IN MANHOOD/WOMANHOOD**) at the conclusion of each and every work period and or work shift and also and again at the completion of my contractual obligations with my location of employment, and or employer.

Pursuant to my above statement, I decline the offer for vaccination product.

By: **YOUR SIGNATURE**  
**YOUR PRINTED NAME**  
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**DATE**