**Liability notice**

**to university or educational employer or other body requesting vaccination**

TO (name of organization, attention to head/ceo/manager/director/all persons in charge)

With regard to the matter of a potential covid vaccine, your offer/request for me to take it, and my lawful and legal right to be fully informed and appraised of ALL facts before going ahead:

I require you to provide me with answers and/or documents in response to the following questions, in accordance with statutory legal requirements:

1. Will you confirm without illegal statements or misrepresentation, what the approved legal status of any vaccine and if it is experimental?

2. Will you confirm without illegal statements or misrepresentation (and provide) all evidence and assurances that the vaccine has been fully, independently and rigorously tested against control groups and the subsequent outcomes of those tests?

3. Will you confirm that your organisation will accept full commercial liability regarding the contents of the vaccine and your direction that I take it, if I were to receive it and if any of the ingredients or contents are toxic to my body, or I have an adverse reaction, or injury?

4. Will you provide all evidence of all the adverse reactions associated with this vaccine since its introduction to help me make an informed decision?

5. Will you take personal liability that the vaccine you are advocating for me to take is NOT ‘experimental mRNA gene altering therapy’?

6. Will you confirm that you will take personal liability to ensure that I will not be under any duress in breach of the Nuremberg Code in being expected to take an experimental injection?

7. Will you take complete commercial and personal liability of the risk of fatality, should I be unfortunate to die after taking the covid 19 Injection, including contracting Covid 19 and any of its variants, or die from the effects of anti body dependent enhancement from the injection?

Once I have received the above information in full and I am satisfied that there is NO threat to my health, I will be happy to accept your offer to receive the treatment, but with certain conditions - namely that:

1. You confirm and take commercial and personal unlimited personal liability that I will suffer no harm.

2. Following acceptance of this, the offer must be signed by a fully qualified doctor who will also take full legal and financial responsibility and commercial liability for any injuries occurring to myself, and/or from any interactions by authorized personnel regarding these procedures.

3. In the event that I should decide to decline the offer of vaccination, please confirm that it will not compromise my position and that I will not suffer prejudice and discrimination as a result?

I would otherwise advise that my inalienable rights are reserved.

I look forward to your response.

Yours Faithfully,

Your name and contact details