



**AFFIDAVIT OF RELIGIOUS BELIEF**

STATE OF DELAWARE

\_\_\_\_\_ COUNTY

1. (I) (We) (am) (are) the (parent[s]) (legal guardian[s]) of \_\_\_\_\_  
Name of Child
2. (I) (We) hereby (swear) (affirm) that (I) (We) subscribe to a belief in a relation to a Supreme Being involving duties superior to those arising from any human relation.
3. (I) (We) further (swear) (affirm) that our belief is sincere and meaningful and occupies a place in (my) (our) life parallel to that filled by the orthodox belief in God.
4. This belief is not a political, sociological or philosophical view of a merely personal moral code.
5. This belief causes (me) (us) to request an exemption from blood lead testing for  
\_\_\_\_\_  
Name of Child

\_\_\_\_\_  
Signature of Parent(s) or Legal Guardian(s)

SWORN TO AND SUBSCRIBED before me, a registered Notary Public, this \_\_\_\_\_  
day of \_\_\_\_\_, 2\_\_\_\_\_.

\_\_\_\_\_ (Seal)

Notary Public

My commission expires:

\_\_\_\_\_