

EXEMPTION CERTIFICATE

This is to certify that

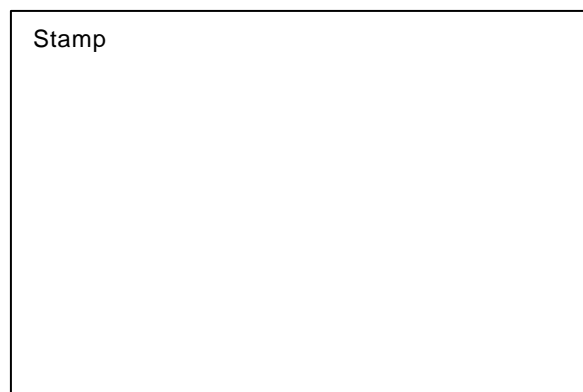
born in

Nationality

cannot be vaccinated against **yellow fever** for medical reasons.

Vaccination is not possible without endangering patient's life due to present health conditions.

Stamp



_____ Place

_____ Date

_____ Signature