

## Section 52(1) of the Constitution Act, 1982 – The supremacy clause

### Provision

52.(1) The Constitution of Canada is the supreme law of Canada, and any law that is inconsistent with the provisions of the Constitution is, to the extent of the inconsistency, of no force or effect.

# The Public Health Act, 1994 (Saskatchewan)

<https://tinyurl.com/xfbwfcve>

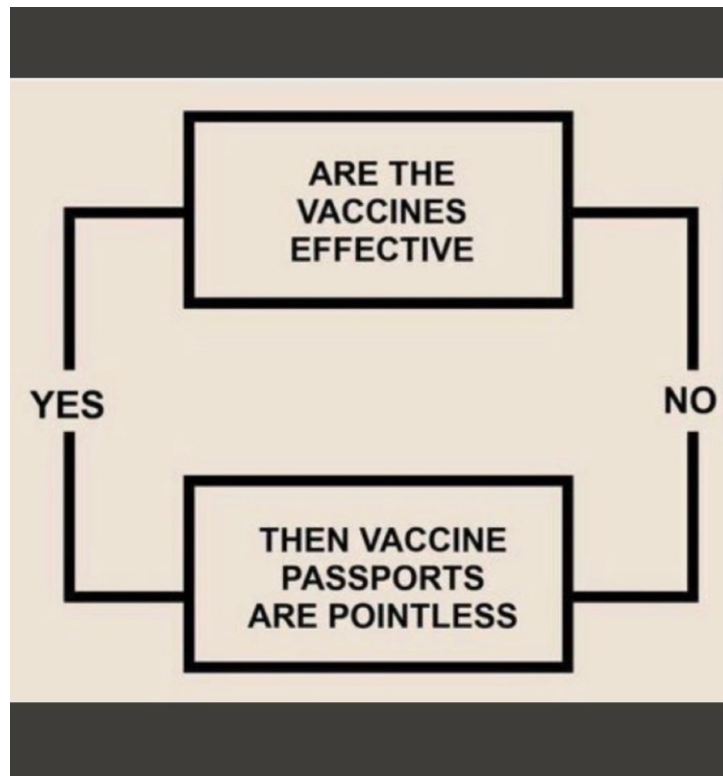
### Conscientious objection to immunization

64(1) A person who conscientiously believes that immunization or prophylaxis would be prejudicial to his or her health or to the health of his or her child or ward, or who for conscientious reasons objects to immunization or prophylaxis, may swear or affirm an affidavit to that effect before a justice of the peace, commissioner for oaths or notary public.

(2) A person described in subsection (1) is excused from compliance with any regulation, bylaw or order pursuant to this Act that makes immunization mandatory if the person delivers personally or by registered mail to the local authority for the area in which the person resides a duly attested affidavit described in that subsection.

1994, c.P-37.1, s.64; 2003, c.29, s.70

See page 7 for an example of an affidavit



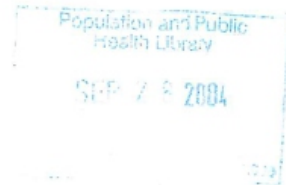
# Canada Communicable Disease Report

<https://tinyurl.com/36rdz8uv>

Date of Publication: May 1997

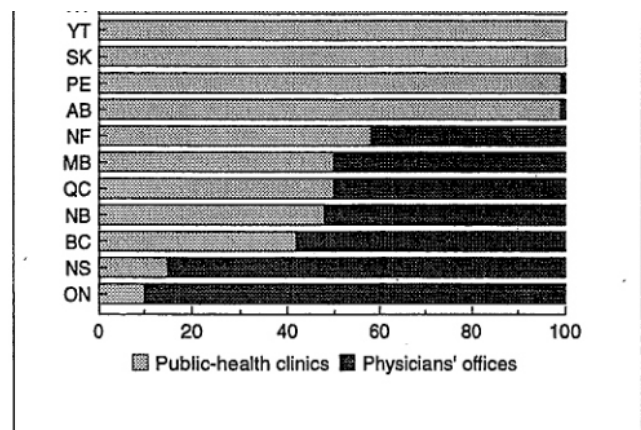
Volume 23S4

## Canadian National Report on Immunization, 1996



Canada

Unlike some countries, immunization is not mandatory in Canada; it cannot be made mandatory because of the Canadian Constitution. Only three provinces have legislation or regulations under their health-protection acts to require proof of immunization for school entrance. Ontario and New Brunswick require proof for diphtheria, tetanus, polio, measles, mumps, and rubella immunization. In Manitoba, only measles vaccination is covered. It must be emphasized that, in these three provinces, exceptions are permitted for medical or



# Canada Labour Code (R.S.C., 1985, c. L-2)

<https://tinyurl.com/5cr6m769>

## DIVISION XV.3 Genetic Testing

### Marginal note: Definitions

247.98 (1) The following definitions apply in this Division.

disclose includes to authorize disclosure. (communiquer)

genetic test, in relation to an employee, means a test that analyzes the employee's DNA, RNA or chromosomes for purposes such as the prediction of disease or vertical transmission risks, or monitoring, diagnosis or prognosis. (test génétique)

### Marginal note: Genetic test

(2) Every employee is entitled not to undergo or be required to undergo a genetic test.

### Marginal note: Disclosure of results

(3) Every employee is entitled not to disclose or be required to disclose the results of a genetic test.

### Marginal note: Disciplinary action

(4) No employer shall dismiss, suspend, lay off or demote an employee, impose a financial or other penalty on an employee, or refuse to pay an employee remuneration in respect of any period that the employee would, but for the exercise of the employee's rights under this Division, have worked, or take any disciplinary action against or threaten to take any such action against an employee

(a) because the employee refused a request by the employer to undergo a genetic test;

(b) because the employee refused to disclose the results of a genetic test; or

(c) on the basis of the results of a genetic test undergone by the employee.

### Marginal note: Disclosure by third party

(5) No person shall disclose to an employer that an employee has undergone a genetic test, or disclose to an employer the results of a genetic test, without the written consent of the employee.

### Marginal note: Collection or use

(6) No employer shall collect or use the results of a genetic test without the written consent of the employee who has undergone the test.

2017, c. 3, s. 8

**(Forced Genetic test for Covid illegal.)**

# THE “CAPABLE” MENTAL HEALTH PATIENT’S RIGHT TO REFUSE TREATMENT

Ronald B Sklar

**“Every human being of adult years and sound mind has a right to determine what should be done with his own body.”** Those words, written by the New York Court of Appeals in 1914, 1 recognized a person’s right under the common law to refuse unwanted medical treatment. The right, however, was limited to persons of “sound mind,” thus expressly excluding the mentally ill. That exclusion was lifted in the United States in 1979 in the Boston Hospital case, 2 prompting one article in a psychiatric journal to depict patients who exercised their right to refuse treatment as “rotting with their rights on.” 3 In a short time, however, the psychiatric profession came around to accept a patient’s “autonomy of choice” with regard to their treatment, shifting attention away from the question of the patient’s “right” to refuse treatment to the question of the patient’s “capacity” to make that decision.

In Canada, a 1991 decision of the **Ontario Court of Appeal** held that a **capable psychiatric patient’s right to refuse treatment was “included in the liberty interests” protected by section 7 of the Canadian Charter of Rights and Freedoms.** In the 2003 case of *Starson v Swayze*, the **Supreme Court of Canada** in turn declared: **“The right to refuse unwanted medical treatment is fundamental to a person’s dignity and autonomy. The right is equally important in the context of treatment for mental illness.”** While the *Starson* Court did not expressly hold that the right was protected under the Charter, its expression of the right as “fundamental to a person’s dignity and autonomy” suggests such a holding was almost inevitable.

Read that again.

**“that a capable psychiatric patient’s right to refuse treatment was  
“included in the liberty interests” protected by section 7 of  
the Canadian Charter of Rights and Freedoms”**

**Supreme Court of Canada in turn declared:**

***“The right to refuse unwanted medical treatment is  
fundamental to a person’s dignity and autonomy.”***

<https://tinyurl.com/jbhe9vsx>

## **Introduction**

The judgment by the war crimes tribunal at Nuremberg laid down 10 standards to which physicians must conform when carrying out experiments on human subjects in a new code that is now accepted worldwide.

This judgment established a new standard of ethical medical behaviour for the post World War II human rights era. Amongst other requirements, this document enunciates the requirement of voluntary informed consent of the human subject. The principle of voluntary informed consent protects the right of the individual to control his own body.

This code also recognizes that the risk must be weighed against the expected benefit, and that unnecessary pain and suffering must be avoided.

This code recognizes that doctors should avoid actions that injure human patients.

The principles established by this code for medical practice now have been extended into general codes of medical ethics.

## **The Nuremberg Code (1947)**

### **Permissible Medical Experiments**

The great weight of the evidence before us to effect that certain types of medical experiments on human beings, when kept within reasonably well-defined bounds, conform to the ethics of the medical profession generally. The protagonists of the practice of human experimentation justify their views on the basis that such experiments yield results for the good of society that are unprocurable by other methods or means of study. All agree, however, that certain basic principles must be observed in order to satisfy moral, ethical and legal concepts:

1. The voluntary consent of the human subject is absolutely essential. This means that the person involved should have legal capacity to give consent; should be so situated as to be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision. This latter element requires that before the acceptance of an affirmative decision by the experimental subject there should be made known to him the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonably to be expected; and the effects upon his health or person which may possibly come from his participation in the experiment.

The duty and responsibility for ascertaining the quality of the consent rests upon each individual who initiates, directs, or engages in the experiment. It is a personal duty and responsibility which may not be delegated to another with impunity.

2. The experiment should be such as to yield fruitful results for the good of society, unprocurable by other methods or means of study, and not random and unnecessary in nature.
3. The experiment should be so designed and based on the results of animal experimentation and a knowledge of the natural history of the disease or other problem under study that the anticipated results justify the performance of the experiment.

4. The experiment should be so conducted as to avoid all unnecessary physical and mental suffering and injury.
5. No experiment should be conducted where there is an a priori reason to believe that death or disabling injury will occur; except, perhaps, in those experiments where the experimental physicians also serve as subjects.
6. The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment.
7. Proper preparations should be made and adequate facilities provided to protect the experimental subject against even remote possibilities of injury, disability or death.
8. The experiment should be conducted only by scientifically qualified persons. The highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.
9. During the course of the experiment the human subject should be at liberty to bring the experiment to an end if he has reached the physical or mental state where continuation of the experiment seems to him to be impossible.
10. During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of the good faith, superior skill and careful judgment required of him, that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject.

For more information see Nuremberg Doctor's Trial, BMJ 1996;313(7070):1445-75.

<https://tinyurl.com/2cj3se3r>



CANADA  
PROVINCE OF SASKATCHEWAN

IN THE COURT OF QUEEN’S BENCH FOR SASKATCHEWAN  
JUDICIAL CENTRE OF REGINA

BETWEEN: \_\_\_\_\_

AND

SASKATCHEWAN HEALTH AUTHORITY

AFFIDAVIT OF: \_\_\_\_\_

I, \_\_\_\_\_ of the City of \_\_\_\_\_ in the Province of Saskatchewan, MAKE OATH AND SAY AS FOLLOWS:

[1] I am a person who conscientiously believes that immunization or prophylaxis would be prejudicial to my health; therefore, for conscientious reasons, I object to immunization or prophylaxis, pursuant to Section 64 (1) of the *Public Health Act*, 1994.

[2] I am a person as described in the subsection (1), so I am excused from compliance with any regulation, bylaw, or order pursuant to this Act that makes immunization mandatory.

[3] My date of birth is \_\_\_\_\_

SWORN BEFORE ME at the }  
City of \_\_\_\_\_ in the Province of }  
Saskatchewan, this \_\_\_\_ day of }  
, A.D. 2021 }  
\_\_\_\_\_ }  
\_\_\_\_\_ }

A COMMISSIONER FOR OATHS in and for  
the Province of Saskatchewan

Address for Service

Saskatchewan

First Session, Forty-second Parliament,  
64-65-66 Elizabeth II, 2015-2016-2017

Première session, quarante-deuxième législature,  
64-65-66 Elizabeth II, 2015-2016-2017

## **STATUTES OF CANADA 2017**

## **LOIS DU CANADA (2017)**

### **CHAPTER 3**

### **CHAPITRE 3**

An Act to prohibit and prevent genetic  
discrimination

Loi visant à interdire et à prévenir la  
discrimination génétique

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#### **ASSENTED TO**

MAY 4, 2017

BILL S-201

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#### **SANCTIONNÉE**

LE 4 MAI 2017

PROJET DE LOI S-201

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## SUMMARY

This enactment prohibits any person from requiring an individual to undergo a genetic test or disclose the results of a genetic test as a condition of providing goods or services to, entering into or continuing a contract or agreement with, or offering specific conditions in a contract or agreement with, the individual. Exceptions are provided for health care practitioners and researchers. The enactment provides individuals with other protections related to genetic testing and test results.

The enactment amends the *Canada Labour Code* to protect employees from being required to undergo or to disclose the results of a genetic test, and provides employees with other protections related to genetic testing and test results. It also amends the *Canadian Human Rights Act* to prohibit discrimination on the ground of genetic characteristics.

## SOMMAIRE

Le texte interdit à quiconque d'obliger une personne à subir un test génétique ou à en communiquer les résultats comme condition préalable à la fourniture de biens et services, à la conclusion ou au maintien d'un contrat ou d'une entente avec elle ou à l'offre de modalités particulières dans un contrat ou dans une entente. Il prévoit des exceptions pour les professionnels de la santé et les chercheurs. Le texte prévoit d'autres protections relatives aux tests génétiques et aux résultats de ceux-ci.

Le texte modifie également le *Code canadien du travail* afin de protéger les employés contre l'obligation de subir un test génétique ou d'en communiquer les résultats, et de prévoir d'autres protections relatives aux tests génétiques et aux résultats de ceux-ci, de même que la *Loi canadienne sur les droits de la personne* afin d'interdire la discrimination fondée sur des caractéristiques génétiques.

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CHAPTER 3

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CHAPITRE 3

An Act to prohibit and prevent genetic discrimination

Loi visant à interdire et à prévenir la discrimination génétique

[Assented to 4th May, 2017]

[Sanctionnée le 4 mai 2017]

Her Majesty, by and with the advice and consent of the Senate and House of Commons of Canada, enacts as follows:

Sa Majesté, sur l'avis et avec le consentement du Sénat et de la Chambre des communes du Canada, édicte :

## Short Title

### Short title

**1** This Act may be cited as the *Genetic Non-Discrimination Act*.

## Titre abrégé

### Titre abrégé

**1** *Loi sur la non-discrimination génétique*.

## Interpretation

### Definitions

**2** The following definitions apply in this Act.

**disclose** includes to authorize disclosure. (*communiquer*)

**genetic test** means a test that analyzes DNA, RNA or chromosomes for purposes such as the prediction of disease or vertical transmission risks, or monitoring, diagnosis or prognosis. (*test génétique*)

**health care practitioner** means a person lawfully entitled under the law of a province to provide health services in the place in which the services are provided by that person. (*professionnel de la santé*)

## Définitions

### Définitions

**2** Les définitions qui suivent s'appliquent à la présente loi.

**communiquer** Est assimilé à l'acte de communiquer le fait d'autoriser la communication. (*disclose*)

**professionnel de la santé** Personne légalement autorisée en vertu de la loi d'une province à fournir des services de santé au lieu où elle les fournit. (*health care practitioner*)

**test génétique** Test visant l'analyse de l'ADN, de l'ARN ou des chromosomes à des fins telles la prédiction de maladies ou de risques de transmission verticale, ou la surveillance, le diagnostic ou le pronostic. (*genetic test*)

## Prohibitions

### Genetic test

**3 (1)** It is prohibited for any person to require an individual to undergo a genetic test as a condition of

- (a) providing goods or services to that individual;

## Interdictions

### Test génétique

**3 (1)** Nul ne peut obliger une personne à subir un test génétique comme condition préalable à l'exercice de l'une ou l'autre des activités suivantes :

**(b)** entering into or continuing a contract or agreement with that individual; or

**(c)** offering or continuing specific terms or conditions in a contract or agreement with that individual.

#### Refusal to undergo genetic test

**(2)** It is prohibited for any person to refuse to engage in an activity described in any of paragraphs (1)(a) to (c) in respect of an individual on the grounds that the individual has refused to undergo a genetic test.

#### Disclosure of results

**4 (1)** It is prohibited for any person to require an individual to disclose the results of a genetic test as a condition of engaging in an activity described in any of paragraphs 3(1)(a) to (c).

#### Refusal to disclose results

**(2)** It is prohibited for any person to refuse to engage in an activity described in any of paragraphs 3(1)(a) to (c) in respect of an individual on the grounds that the individual has refused to disclose the results of a genetic test.

#### Written consent

**5** It is prohibited for any person who is engaged in an activity described in any of paragraphs 3(1)(a) to (c) in respect of an individual to collect, use or disclose the results of a genetic test of the individual without the individual's written consent.

#### Exceptions: health care practitioners and researchers

**6** Sections 3 to 5 do not apply to

**(a)** a physician, a pharmacist or any other health care practitioner in respect of an individual to whom they are providing health services; or

**(b)** a person who is conducting medical, pharmaceutical or scientific research in respect of an individual who is a participant in the research.

## Offences and Punishment

#### Contravention of sections 3 to 5

**7** Every person who contravenes any of sections 3 to 5 is guilty of an offence and is liable

**(a)** on conviction on indictment, to a fine not exceeding \$1,000,000 or to imprisonment for a term not exceeding five years, or to both; or

**a)** pour lui fournir des biens ou des services;

**b)** pour conclure ou maintenir un contrat ou une entente avec elle;

**c)** pour offrir ou maintenir des modalités particulières dans le cadre d'un contrat ou d'une entente avec elle.

#### Refus de subir un test génétique

**(2)** Nul ne peut refuser d'exercer une activité visée à l'un des alinéas (1)a) à c) à l'égard d'une personne au motif qu'elle a refusé de subir un test génétique.

#### Communication des résultats

**4 (1)** Nul ne peut obliger une personne à communiquer les résultats d'un test génétique comme condition préalable à l'exercice d'une activité visée à l'un des alinéas 3(1)a) à c).

#### Refus de communiquer les résultats

**(2)** Nul ne peut refuser d'exercer une activité visée à l'un des alinéas 3(1)a) à c) à l'égard d'une personne au motif qu'elle a refusé de communiquer les résultats d'un test génétique.

#### Consentement écrit

**5** Il est interdit à quiconque exerce une activité visée aux alinéas 3(1)a) à c) à l'égard d'une personne de recueillir, d'utiliser ou de communiquer les résultats d'un test génétique de celle-ci sans son consentement écrit.

#### Exceptions : professionnels de la santé et chercheurs

**6** Les articles 3 à 5 ne s'appliquent pas :

**a)** au médecin, au pharmacien et à tout autre professionnel de la santé qui fournissent des services de santé à une personne;

**b)** au chercheur qui mène des recherches médicales, pharmaceutiques ou scientifiques à l'égard d'un participant à ces recherches.

## Infractions et peines

#### Contravention aux articles 3 à 5

**7** Quiconque contrevient à l'un des articles 3 à 5 commet une infraction et encourt, sur déclaration de culpabilité :

**a)** par mise en accusation, une amende maximale de un million de dollars et un emprisonnement maximal de cinq ans, ou l'une de ces peines;

(b) on summary conviction, to a fine not exceeding \$300,000 or to imprisonment for a term not exceeding twelve months, or to both.

R.S., c. L-2

## Canada Labour Code

**8 The Canada Labour Code is amended by adding the following after section 247.97:**

### DIVISION XV.3

## Genetic Testing

### Definitions

**247.98 (1)** The following definitions apply in this Division.

**disclose** includes to authorize disclosure. (*communiquer*)

**genetic test**, in relation to an employee, means a test that analyzes the employee's DNA, RNA or chromosomes for purposes such as the prediction of disease or vertical transmission risks, or monitoring, diagnosis or prognosis. (*test génétique*)

### Genetic test

(2) Every employee is entitled not to undergo or be required to undergo a genetic test.

### Disclosure of results

(3) Every employee is entitled not to disclose or be required to disclose the results of a genetic test.

### Disciplinary action

(4) No employer shall dismiss, suspend, lay off or demote an employee, impose a financial or other penalty on an employee, or refuse to pay an employee remuneration in respect of any period that the employee would, but for the exercise of the employee's rights under this Division, have worked, or take any disciplinary action against or threaten to take any such action against an employee

(a) because the employee refused a request by the employer to undergo a genetic test;

(b) because the employee refused to disclose the results of a genetic test; or

(c) on the basis of the results of a genetic test undergone by the employee.

b) par procédure sommaire, une amende maximale de trois cent mille dollars et un emprisonnement maximal de douze mois, ou l'une de ces peines.

L.R., ch. L-2

## Code canadien du travail

**8 Le Code canadien du travail est modifié par adjonction, après l'article 247.97, de ce qui suit :**

### SECTION XV.3

## Tests génétiques

### Définitions

**247.98 (1)** Les définitions qui suivent s'appliquent à la présente section.

**communiquer** Est assimilé à l'acte de communiquer le fait d'autoriser la communication. (*disclose*)

**test génétique** Test visant l'analyse de l'ADN, de l'ARN ou des chromosomes de l'employé à des fins telles la prédiction de maladies ou de risques de transmission verticale, ou la surveillance, le diagnostic ou le pronostic. (*genetic test*)

### Test génétique

(2) Tout employé a le droit de refuser de subir un test génétique, et nul ne peut l'obliger à en subir un.

### Communication des résultats

(3) Tout employé a le droit de ne pas communiquer les résultats d'un test génétique, et nul ne peut l'obliger à les communiquer.

### Mesures disciplinaires interdites

(4) Il est interdit à l'employeur de congédier, suspendre, mettre à pied ou rétrograder un employé ou de lui imposer une sanction pécuniaire ou autre ou de refuser de lui verser la rémunération afférente à la période au cours de laquelle il aurait travaillé s'il ne s'était pas prévalu des droits prévus par la présente section, ou de prendre — ou menacer de prendre — des mesures disciplinaires contre lui pour l'un ou l'autre des motifs suivants :

a) son refus de subir un test génétique à la demande de l'employeur;

b) son refus de communiquer les résultats d'un test génétique;

c) les résultats d'un test génétique qu'il a subi.

### Disclosure by third party

(5) No person shall disclose to an employer that an employee has undergone a genetic test, or disclose to an employer the results of a genetic test, without the written consent of the employee.

### Collection or use

(6) No employer shall collect or use the results of a genetic test without the written consent of the employee who has undergone the test.

### Complaint to inspector

**247.99 (1)** An employee who alleges that an employer has taken action against the employee in contravention of subsection 247.98(4) may make a complaint in writing to an inspector.

### Time for making complaint

(2) Subject to subsection (3), the complaint shall be made to the inspector not later than 90 days after the date on which the complainant knew, or in the inspector's opinion ought to have known, of the action or circumstances giving rise to the complaint.

### Extension of time

(3) The Minister may extend the period of time referred to in subsection (2) if the Minister is satisfied that a complaint was made in that period to a government official who had no authority to deal with the complaint but that the employee making the complaint believed the official had that authority.

### Inspector to assist parties

(4) On receipt of a complaint made under subsection (1), an inspector shall endeavour to assist the parties to the complaint to settle the complaint or cause another inspector to do so.

### Where complaint not settled within reasonable time

(5) Where a complaint is not settled under subsection (4) within such period as the inspector endeavouring to assist the parties pursuant to that subsection considers to be reasonable in the circumstances, the inspector shall, on the written request of the employee who made the complaint that the complaint be referred to an adjudicator under subsection (6),

(a) report to the Minister that the endeavour to assist the parties to settle the complaint has not succeeded; and

(b) deliver to the Minister the complaint made under subsection (1) and any other statements or documents the inspector has that relate to the complaint.

### Communication par un tiers

(5) Nul ne peut communiquer à l'employeur le fait qu'un employé a subi un test génétique ou les résultats d'un tel test sans le consentement écrit de l'employé.

### Collecte ou utilisation

(6) Il est interdit à l'employeur de recueillir ou d'utiliser les résultats d'un test génétique subi par un employé sans le consentement écrit de celui-ci.

### Plainte à un inspecteur

**247.99 (1)** L'employé peut déposer une plainte écrite auprès d'un inspecteur au motif que son employeur a pris, à son endroit, des mesures contraires au paragraphe 247.98(4).

### Délai

(2) Sous réserve du paragraphe (3), la plainte est déposée auprès de l'inspecteur dans les quatre-vingt-dix jours suivant la date où le plaignant a eu connaissance — ou, selon l'inspecteur, aurait dû avoir connaissance — de l'acte ou des circonstances y ayant donné lieu.

### Prorogation du délai

(3) Le ministre peut proroger le délai fixé au paragraphe (2) dans les cas où il est convaincu que l'intéressé a déposé sa plainte à temps mais auprès d'un fonctionnaire qu'il croyait, à tort, habilité à la recevoir.

### Conciliation par l'inspecteur

(4) Dès réception de la plainte, l'inspecteur s'efforce de concilier les parties ou confie cette tâche à un autre inspecteur.

### Cas d'échec

(5) Si la conciliation n'aboutit pas dans un délai qu'il estime raisonnable en l'occurrence, l'inspecteur, sur demande écrite du plaignant de renvoyer le cas à un arbitre conformément au paragraphe (6) :

a) fait rapport au ministre de l'échec de son intervention;

b) transmet au ministre la plainte accompagnée des autres déclarations ou documents s'y rapportant.

### Reference to adjudicator

**(6)** The Minister may, on receipt of a report pursuant to subsection (5), appoint any person that the Minister considers appropriate as an adjudicator to hear and adjudicate on the complaint in respect of which the report was made, and refer the complaint to the adjudicator.

### Decision of adjudicator

**(7)** An adjudicator to whom a complaint has been referred under subsection (6) shall

- (a)** consider whether the employer has contravened subsection 247.98(4) and render a decision on it; and
- (b)** send a copy of the decision with the reasons for the decision to each party to the complaint and to the Minister.

### Orders

**(8)** If an adjudicator decides pursuant to subsection (7) that an employer has contravened subsection 247.98(4), the adjudicator may, by order, require the employer to cease contravening that subsection and may, if applicable, by order, require the employer to

- (a)** permit the employee to return to the duties of their employment;
- (b)** reinstate the former employee;
- (c)** pay to the employee or former employee compensation not exceeding the sum that, in the adjudicator's opinion, is equivalent to the remuneration that would, but for the contravention, have been paid by the employer to the employee or former employee;
- (d)** rescind any disciplinary action taken in respect of the contravention and pay compensation to the employee, not exceeding the sum that, in the adjudicator's opinion, is equivalent to any financial or other penalty imposed on the employee by the employer; and
- (e)** do any other like thing that it is equitable to require the employer to do in order to remedy or counteract any consequences of the contravention.

### Application of provisions

**(9)** Subsection 242(2) applies to a complaint that has been referred to an adjudicator under subsection (6), sections 243 and 244 apply to an order of an adjudicator under subsection (8), and subsection 246(1) applies to an employee who makes a complaint under subsection (1), with any necessary modifications.

### Renvoi à un arbitre

**(6)** Sur réception du rapport visé au paragraphe (5), le ministre peut désigner en qualité d'arbitre la personne qu'il juge qualifiée pour entendre et trancher l'affaire et lui transmettre la plainte.

### Décision de l'arbitre

**(7)** Pour l'examen du cas dont il est saisi, l'arbitre :

- a)** détermine si l'employeur a contrevenu au paragraphe 247.98(4) et rend une décision sur la question;
- b)** transmet une copie de sa décision, motifs à l'appui, à chaque partie ainsi qu'au ministre.

### Ordonnances

**(8)** S'il détermine, conformément au paragraphe (7), que l'employeur a contrevenu au paragraphe 247.98(4), l'arbitre peut, par ordonnance, enjoindre à celui-ci de cesser d'y contrevenir et en outre, s'il y a lieu :

- a)** de permettre à l'employé de reprendre son travail;
- b)** de réintégrer dans son emploi l'ancien employé;
- c)** de verser à l'employé ou à l'ancien employé une indemnité équivalant au plus, à son avis, à la rémunération qui lui aurait été payée s'il n'y avait pas eu contravention;
- d)** d'annuler toute mesure disciplinaire prise à l'encontre de l'employé et de payer à celui-ci une indemnité équivalant au plus, à son avis, à la sanction pécuniaire ou autre qui lui a été imposée par l'employeur;
- e)** de prendre toute autre mesure qui soit équitable et de nature à remédier ou à parer aux effets de la contravention.

### Application des dispositions

**(9)** Le paragraphe 242(2) s'applique, avec les adaptations nécessaires, à la plainte renvoyée à un arbitre conformément au paragraphe (6); les articles 243 et 244 s'appliquent, avec les adaptations nécessaires, à l'ordonnance de l'arbitre visée au paragraphe (8); et le paragraphe 246(1) s'applique, avec les adaptations nécessaires, à

R.S., c. H-6

## Canadian Human Rights Act

**9 Section 2 of the *Canadian Human Rights Act* is replaced by the following:**

### Purpose

**2** The purpose of this Act is to extend the laws in Canada to give effect, within the purview of matters coming within the legislative authority of Parliament, to the principle that all individuals should have an opportunity equal with other individuals to make for themselves the lives that they are able and wish to have and to have their needs accommodated, consistent with their duties and obligations as members of society, without being hindered in or prevented from doing so by discriminatory practices based on race, national or ethnic origin, colour, religion, age, sex, sexual orientation, marital status, family status, genetic characteristics, disability or conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered.

**10 (1) Subsection 3(1) of the Act is replaced by the following:**

### Prohibited grounds of discrimination

**3 (1)** For all purposes of this Act, the prohibited grounds of discrimination are race, national or ethnic origin, colour, religion, age, sex, sexual orientation, marital status, family status, genetic characteristics, disability and conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered.

**(2) Section 3 of the Act is amended by adding the following after subsection (2):**

### Idem

**(3)** Where the ground of discrimination is refusal of a request to undergo a genetic test or to disclose, or authorize the disclosure of, the results of a genetic test, the discrimination shall be deemed to be on the ground of genetic characteristics.

## Coordinating Amendments

### Bill C-16

**11 (1) Subsections (2) and (3) apply if Bill C-16, introduced in the 1st session of the 42nd Parlia-**

l'employé qui dépose une plainte en vertu du paragraphe (1).

L.R., ch. H-6

## Loi canadienne sur les droits de la personne

**9 L'article 2 de la *Loi canadienne sur les droits de la personne* est remplacé par ce qui suit :**

### Objet

**2** La présente loi a pour objet de compléter la législation canadienne en donnant effet, dans le champ de compétence du Parlement du Canada, au principe suivant : le droit de tous les individus, dans la mesure compatible avec leurs devoirs et obligations au sein de la société, à l'égalité des chances d'épanouissement et à la prise de mesures visant à la satisfaction de leurs besoins, indépendamment des considérations fondées sur la race, l'origine nationale ou ethnique, la couleur, la religion, l'âge, le sexe, l'orientation sexuelle, l'état matrimonial, la situation de famille, les caractéristiques génétiques, la déficience ou l'état de personne gracée.

**10 (1) Le paragraphe 3(1) de la même loi est remplacé par ce qui suit :**

### Motifs de distinction illicite

**3 (1)** Pour l'application de la présente loi, les motifs de distinction illicite sont ceux qui sont fondés sur la race, l'origine nationale ou ethnique, la couleur, la religion, l'âge, le sexe, l'orientation sexuelle, l'état matrimonial, la situation de famille, les caractéristiques génétiques, l'état de personne gracée ou la déficience.

**(2) L'article 3 de la même loi est modifié par adjonction, après le paragraphe (2), de ce qui suit :**

### Idem

**(3)** Une distinction fondée sur le refus d'une personne, à la suite d'une demande, de subir un test génétique, de communiquer les résultats d'un tel test ou d'autoriser la communication de ces résultats est réputée être de la discrimination fondée sur les caractéristiques génétiques.

## Dispositions de coordination

### Projet de loi C-16

**11 (1) En cas de sanction du projet de loi C-16, déposé au cours de la 1<sup>re</sup> session de la 42<sup>e</sup> législa-**

ment and entitled *An Act to amend the Canadian Human Rights Act and the Criminal Code* (in this section referred to as the “other Act”), receives royal assent.

**(2) On the first day on which both section 1 of the other Act and section 9 of this Act are in force, section 2 of the *Canadian Human Rights Act* is replaced by the following:**

#### **Purpose**

**2** The purpose of this Act is to extend the laws in Canada to give effect, within the purview of matters coming within the legislative authority of Parliament, to the principle that all individuals should have an opportunity equal with other individuals to make for themselves the lives that they are able and wish to have and to have their needs accommodated, consistent with their duties and obligations as members of society, without being hindered in or prevented from doing so by discriminatory practices based on race, national or ethnic origin, colour, religion, age, sex, sexual orientation, gender identity or expression, marital status, family status, genetic characteristics, disability or conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered.

**(3) On the first day on which both section 2 of the other Act and subsection 10(1) of this Act are in force, subsection 3(1) of the *Canadian Human Rights Act* is replaced by the following:**

#### **Prohibited grounds of discrimination**

**3 (1)** For all purposes of this Act, the prohibited grounds of discrimination are race, national or ethnic origin, colour, religion, age, sex, sexual orientation, gender identity or expression, marital status, family status, genetic characteristics, disability and conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered.

ture et intitulé *Loi modifiant la Loi canadienne sur les droits de la personne et le Code criminel* (appelé « autre loi » au présent article), les paragraphes (2) et (3) s'appliquent.

**(2) Dès le premier jour où, à la fois, l'article 1 de l'autre loi et l'article 9 de la présente loi sont en vigueur, l'article 2 de la *Loi canadienne sur les droits de la personne* est remplacé par ce qui suit :**

#### **Objet**

**2** La présente loi a pour objet de compléter la législation canadienne en donnant effet, dans le champ de compétence du Parlement du Canada, au principe suivant : le droit de tous les individus, dans la mesure compatible avec leurs devoirs et obligations au sein de la société, à l'égalité des chances d'épanouissement et à la prise de mesures visant à la satisfaction de leurs besoins, indépendamment des considérations fondées sur la race, l'origine nationale ou ethnique, la couleur, la religion, l'âge, le sexe, l'orientation sexuelle, l'identité ou l'expression de genre, l'état matrimonial, la situation de famille, les caractéristiques génétiques, la déficience ou l'état de personne graciée.

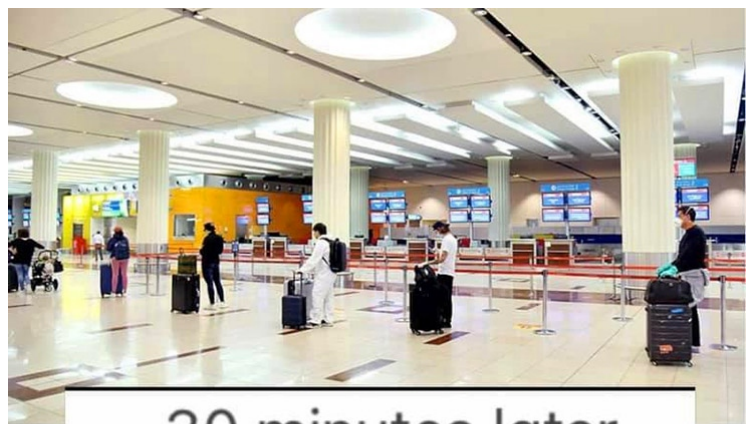
**(3) Dès le premier jour où, à la fois, l'article 2 de l'autre loi et le paragraphe 10(1) de la présente loi sont en vigueur, le paragraphe 3(1) de la *Loi canadienne sur les droits de la personne* est remplacé par ce qui suit :**

#### **Motifs de distinction illicite**

**3 (1)** Pour l'application de la présente loi, les motifs de distinction illicite sont ceux qui sont fondés sur la race, l'origine nationale ou ethnique, la couleur, la religion, l'âge, le sexe, l'orientation sexuelle, l'identité ou l'expression de genre, l'état matrimonial, la situation de famille, les caractéristiques génétiques, l'état de personne graciée ou la déficience.



Aye, fight and you may die.  
Run, and you'll live...  
at least a while.  
And dying in your beds,  
many years from now,  
would you be willin' to trade  
ALL the days,  
from this day to that,  
for one chance, just one chance,  
to come back here and tell  
our enemies that they may take our lives,  
but they'll never take... OUR FREEDOM!



.....30 minutes later.....

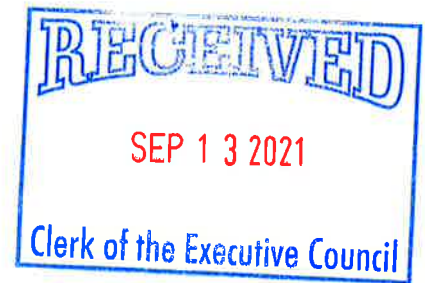


*"The road to slavery is paved by the blood of the ignorant."*



Province of Saskatchewan

MINISTER'S ORDER



By Order of the Lieutenant Governor in Council 465/2021, dated September 13, 2021 a declaration of emergency has been made for the Province of Saskatchewan to address the COVID-19 Public Health Emergency.

Sections 18 and 18.1 of *The Emergency Planning Act* provide, in part as follows:

**Powers of minister in an emergency**

18(1) On the making of an emergency declaration or a renewal of an emergency declaration and during the emergency period, the minister may:

- (a) put into operation any emergency plan or program that the minister considers appropriate;
- (b) authorize or require a local authority to put into effect any emergency plan for the municipality;
- (c) assume direction and control of the emergency response of a local authority;
- (d) acquire or utilize any real or personal property that the minister considers necessary to prevent, combat or alleviate the effects of an emergency;
- (e) authorize any qualified person to render aid of a type that the person is qualified to provide;
- (f) control or prohibit travel to or from any area of Saskatchewan;
- (g) provide for the restoration of essential facilities and the distribution of essential supplies;
- (h) provide, maintain and co-ordinate emergency medical, welfare, law enforcement and other essential services in any part of Saskatchewan;
- (i) cause the evacuation of persons and the removal of persons or live stock and personal property from any area of Saskatchewan that is or may be affected by an emergency and make arrangements for the adequate care and protection of those persons or live stock and of the personal property;
- (j) authorize the entry into any building or on any land, without warrant, by any person in the course of implementing an emergency plan;
- (k) cause the demolition or removal of any trees, structures or crops if the demolition or removal is necessary or appropriate in order to reach the scene of the emergency, to attempt to forestall its occurrence or to combat its progress;
- (l) procure or fix prices for food, clothing, fuel, equipment, medical supplies or other essential supplies and the use of any property, services, resources or equipment within any part of Saskatchewan during the emergency period;
- (l.1) cause information to be collected, used or disclosed that the minister is satisfied is necessary to prevent, combat or alleviate the effects of the emergency and for no other purpose;
- (m) conscript persons needed to meet an emergency; and
- (n) do all acts and take all proceedings that are reasonably necessary to meet the emergency.

**Rules re section 18 orders**

**18.1(1)** Section 18 and every order made pursuant to section 18 prevail in the case of any conflict with any other Act, regulation, order, collective agreement, other agreement or other law.

I, Scott Moe, President of the Executive Council, in accordance with and in furtherance of the general powers and duties set out in sections 18 and 18.1 of *The Emergency Planning Act*, hereby ORDER and DIRECT that in the Province of Saskatchewan, including the City of Lloydminster, for the duration of the above noted state of emergency:

- (a) all persons are required to comply with any orders made by the Minister of Health pursuant to *The Public Health Act, 1994* to the extent that the order does not conflict with this order or any other order pursuant to section 18 of *The Emergency Planning Act*;
- (b) all persons are required to comply with any orders issued by the Office of the Chief Medical Health Officer, to the extent that the order does not conflict with this order or any other order pursuant to section 18 of *The Emergency Planning Act*;
- (c) all persons are required to comply with any direction issued by the Saskatchewan Public Safety Agency in accordance with its powers and duties under *The Emergency Planning Act* and *The Saskatchewan Public Safety Agency Act*, to the extent that the directive or order does not conflict with this order or any other order pursuant to section 18 of *The Emergency Planning Act*; and
- (d) all persons defined as employers and employees in the Letter of Understanding entered into between Saskatchewan Health Authority (SHA), Saskatchewan Association of Health Organizations (SAHO), Canadian Union of Public Employees (CUPE), Health Sciences Association of Saskatchewan (HSAS), Saskatchewan Government and General Employees' Union, Health Providers (SGEU), Service Employees International Union – West (SEIU) and the Saskatchewan Union of Nurses (SUN) dated April 17, 2020 relating to redeployment, assignment and cohorting of health care employees across Saskatchewan to address staffing issues and to address health care needs to ensure appropriate and safe patient care, are required to comply with the terms of the Letter of Understanding, notwithstanding any terms of expiry in the said Letter of Understanding.

Dated September 13, 2021 at Regina, Saskatchewan.



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Honourable Scott Moe  
President of the Executive Council



## **Attention Canadian business owners, all unions, all federal and provincial employees, all educational institutions, all lawyers and judges.**

**To whom it may concern, this letter is addressed to you who are applying illegal coercive measures.**

This 2nd "PUBLIC ADVERTISEMENT" warning, abridged from the Lametti Open Letter August 10, 2021 LePowerShift.ca homepage, is to counter the single narrative of fear promoted by governments and maintained by the media. **You and your company are at risk** because requiring your employees, students and customers to be vaccinated or masked on your premises or adapting your business policies to implement the designs of governments makes you complicit because **your business policies do not supersede human rights.**

**YOUR GOVERNMENTS LIE TO YOU AND ENCOURAGE YOU TO DO ILLEGAL THINGS, PUTTING YOUR BUSINESS AT RISK OF LEGAL ACTION.**

**Our governments are using you illegally by putting the responsibility on you to implement all these senseless but mostly unjustified measures.** You risk a fine of up to 1 million dollars and up to 5 years in prison for each person or employee forced to receive mRNA vaccines. A formal "International Council on Human Rights complaint procedure" is underway.

Contact your legal department and your local human rights commission, privacy commissioners and ombudsmen before implementing these policies and service requirements. **We recommend that you read our documents regarding criminal wrongdoing in which you may be involved** (LePowerShift.ca homepage all our supporting documents are under Lametti Open Letter June 14, 2021 - [AppendixDocument -pdfdownload](#))

**Our undeniable evidence of criminal malfeasance** should be of interest to you because there has been a violation of the human rights of the Canadian law of genetic non-discrimination, PCR testing and forced injections. **There has been abuse of power and wandering** as they never considered the isolation of the SARS-CoV-2 virus right here in Canada on March 12, 2020. **Knowing this, no action is warranted.**

**Are you aware that David Lametti has attempted to eliminate the rights of the majority of citizens** from the Criminal Code of Canada in order to allow the provinces to subject the Canadian people to inadequate measures instead of protecting the most vulnerable? This is a serious matter. We have the evidence.

**Do you know that the RT-PCR tests** studied with many more cycles than required, **seem to be rather a collection of DNA without the informed consent of the donors, ILLEGAL.** Even worse, this DNA collection is being sold to Bio-banks for what we suspect is fraudulent and illegal uses. **Is this their new economy? Are they aiming for transhumanism?**

**What do you think about 2-year early elections?** Is this a way to get the rats off the boat before it sinks? Our governments know how to be in hot water, they prefer to disappear and leave their hot issues to the newcomers in power. **LET'S NOT GIVE THEM AN EASY WAY OUT - LET'S TAKE BACK OUR LIVES.**

For your information, a growing number of union members, members of professional associations, doctors, scientists, nurses, soldiers, natives, people in distress, are urgently contacting us to join our fight. **It's your turn now!**

Even though the Canadian government is trying to change the laws to accommodate: vaccine passport, vaccine and more draconian measures, they will be challenged in court before the 2nd reading.

I thank you in advance for your diligence and consideration. Respectfully, without prejudice and with my most sincere regards,

Nicole Lebrasseur  
Canadian Peoples' Union NFP  
[nicole@canadianpeoplesunion.com](mailto:nicole@canadianpeoplesunion.com)  
[thepowershift.ca](http://thepowershift.ca)



## ATTENTION CANADIAN BUSINESS OWNERS

### **Possible criminal and civil litigation charges for requiring employees, students and clients to be vaccinated or forced masking, even if added to your business policies.**

To whom this may concern, this is for you and everyone of significance across Canada in relation to Vaccine and Masking Policies. It is time for everyone to get on the right side to protect the Canadian people with true scientific facts and the LAW instead of political agendas.

This is a courtesy fair warning "PUBLIC ANNOUNCEMENT" to let you know that possible criminal and civil litigation charges for requiring employees, students and clients to be vaccinated or masking in your facilities or being added to your business policies placing you and your company at risk. Your business policies do not supersede human rights.

Please contact your legal department and Human Rights commission, the Privacy Commissioners and ombudsmen in your area before proceeding with your policies and service requirements. It is in your best interest to read the documents attached regarding the criminal malfeasance that you may be implicated into.

The premiers of the provinces are trying to get the businesses and corporations to enforce what is illegal for them to do through you. You are at risk of enquiring up to a 1 million dollar fine and up to 5 yrs. in jail per person or employee forced into mRNA Vaccinations.

A formal "International Human Rights Council Complaint Procedure" is in process.

We thought that the undeniable proof within our Criminal Malfeasance document would be of interest to you regarding, Criminal Malfeasance on the part of all levels of the Canadian Governance, the Minister of Justice and Attorney General David Lametti and Public Health officials across Canada regarding SARS-CoV-2 (covid -19) Non-Derogation of Human Rights violations of the Canadian Genetic Non-Discrimination ACT and PCR tests and coerced Injections.

I have attached a copy of the letter with added links to the appendices which was sent by bailiff, fax and email to the Minister of Justice and Attorney General David Lametti and included his participation in trying to destroy the act from Canada's Criminal Code in order to allow the provinces to subject the Canadian people to more draconian measures instilled through eliminating the rights of the healthy majority instead of protecting the most vulnerable.

Our economy and the hardships suffered were warrantless once you see the reality of the SARS-CoV-2 Isolation of March 2020. Don't you think it's time that you stand with the people? Even if the Canadian Government tries to change the laws to suit a vaccine passport and more draconian measures, they will be challenged in a court of law before the 2nd reading.

FYI: The letter to the Minister of Justice and Attorney general David Lametti is also on our website with all the downloadable Appendix PDFs.

<https://www.thepowershift.ca/open-letter>

I thank you for your time and consideration in advance. Respectfully without prejudice and warmest regards,

Nicole Lebrasseur  
The Canadian Peoples' Union NFP  
[nicole@canadianpeoplesunion.com](mailto:nicole@canadianpeoplesunion.com)  
Tel: (226) 777-5580  
[thepowershift.ca](http://thepowershift.ca)

## Notice of Liability COVID-19 Testing

Attn: \_\_\_\_\_

Re: Any COVID-19 testing forcibly required, mandated or administered to Canadian citizens, including children, by the government, appointed officials, employers, educators, and the like.

**This is an official and personal Notice of Liability.**

**You are not my physician or a medical professional and, therefore, you are unlawfully practicing medicine by prescribing, recommending, and/or using coercion to insist I submit to testing for COVID-19, such as but not limited to, PCR testing which includes rapid tests, blood tests, or any medical intervention to determine any communicable disease known through proof of a genome report.**

To begin with, the emergency measures are based on the claim that we are experiencing a “public health emergency.” There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season<sup>1</sup>.

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose alleged COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this alleged pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus<sup>2</sup>. Mullis warns that, *“the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”*

In light of this warning, the current PCR test utilization, set at higher amplifications (+35), is producing up to 97% false positives<sup>3</sup>. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2<sup>4</sup>.

In November 2020, a Portuguese court ruled that PCR tests are unreliable<sup>5</sup>.

On November 20, 2020 a study from Wuhan, of nearly 10 million residents, revealed that the detection of asymptomatic positive cases was very low and there was no evidence of transmission from asymptomatic people. A nucleic acid test was used rather than the unreliable PCR testing<sup>6</sup>.

On December 14, 2020, the WHO admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive<sup>7</sup>.

Feb 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable<sup>8</sup>.

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1 <https://www.bitchute.com/video/nOgq0BxXfZ4f>

2 <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

3 <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

4 <https://cormandrogenreview.com/report/>

5 <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

6 <https://www.nature.com/articles/s41467-020-19802-w>

7 <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

8 <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing<sup>9</sup>.

On April 8, 2021, a German Court ruled against PCR testing stating, *“the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”*<sup>10</sup>

On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason<sup>11</sup>.

On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.<sup>12</sup>

**On July 21, 2021 - Innova Medical Group Recalled Unauthorized SARS-CoV-2 Antigen Rapid Qualitative Test with Risk of False Test Results.** The FDA has identified this as a Class I recall, the most serious type of recall. Use of these devices may cause serious injuries or death<sup>13</sup>.

On July 21, 2021 the CDC sent out a “Lab Alert revoking the emergency use authorization to RT-PCR for COVID-19 testing and encourages laboratories to adopt a multiplexed method that can facilitate detection and differentiation of SARS-CoV-2 and influenza viruses”<sup>14</sup>.

The Nuremberg Code<sup>15</sup>, to which Canada is a signatory, states that it is essential before performing a medical procedure on human beings, that there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision.

Nuremberg Code: Article 6, section 1:

Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information. The consent should, where appropriate, be expressed and may be withdrawn by the person concerned at any time and for any reason WITHOUT DISADVANTAGE or prejudice.

Nuremberg Code: Article 6, section 3:

In no case should a collective community agreement or the consent of a community leader or other authority substitute for an individual’s informed consent.

Under the *Crimes Against Humanity and War Crimes Act of Canada*<sup>16</sup>, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The Act also confirms that every person **who conspires or attempts to commit, is an**

9 <https://greatgameindia.com/austria-court-pcr-tes>

10 <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler>

11 <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

12 <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

13 <https://www.fda.gov/medical-devices/medical-device-recalls/innova-medical-group-recalls-unauthorized-sars-cov-2-antigen-rapid-qualitative-test-risk-false-test>

14 [https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes\\_CDC\\_RT-PCR\\_SARS-CoV-2\\_Testing\\_1.html](https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes_CDC_RT-PCR_SARS-CoV-2_Testing_1.html)

15 [https://media.tghn.org/medialibrary/2011/04/BMJ\\_No\\_7070\\_Volume\\_313\\_The\\_Nuremberg\\_Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf)

16 <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

**accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the *Criminal Code of Canada*<sup>17</sup>, a person commits an assault when, **without the consent of another person, he applies force intentionally to that other person, directly or indirectly**. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

According to Section 14(1) of the *Quarantine Act*, screening cannot “involve the entry into the traveler’s body of any instrument or other foreign body”<sup>18</sup>.

There is no legislation that allows an employer, business owner, educator, government entity, or any individual in any other capacity, to discriminate against, force, coerce, prescribe, recommend or mandate that any person, including children, submit to a medical procedure, especially with the threat of loss of guaranteed rights such as, but not limited to, employment, education, goods and services, travel, or respect for bodily autonomy.

Anyone involved in pressuring, influencing, or coercing others to submit to a COVID-19 test, and that individual suffers any adverse consequences, including but not limited to emotional duress as a result of the test, will be opening themselves up to personal civil liability, and potential personal criminal liability, according to the Canadian Criminal Code, the Privacy Act, the Nuremberg Code, and the Crimes Against Humanity and War Crimes Act of Canada.

Administration of a COVID-19 test is defined as a “medical procedure”. In what other medical context could non-doctors and non-pharmacists prescribe or promote medical testing? This is unauthorized practice of medicine.

Bodily integrity is the inviolability of the physical body and emphasizes the importance of personal autonomy, self-ownership, and self-determination of human beings over their own bodies. In the field of human rights, violation of the bodily integrity of another is regarded as an unethical infringement, intrusive, and possibly criminal.

Therefore, I hereby notify you that I will hold you personally liable for any harm I may suffer, financial injury and/or loss of my personal income and my ability to provide food and shelter for myself or my family if you use coercion, force or discriminate against me based on my decision not to participate in COVID-19 testing of any kind, not limited to rapid testing, internal swabbing or blood tests.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Source: Action4Canada.com

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<sup>17</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

<sup>18</sup> <https://laws-lois.justice.gc.ca/eng/acts/Q-1.1/page-1.html>



## Vaccine Notice of Liability Employer

Employer: \_\_\_\_\_

Attn: \_\_\_\_\_

### Re: COVID-19 injections recommended or administered to employees

#### This is an official and personal Notice of Liability.

**As my employer you are not a medical professional and, therefore, you are unlawfully practising medicine by prescribing, recommending, and/or using coercion to insist employees submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.**

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.<sup>1</sup>

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus<sup>2</sup>. Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives<sup>3</sup>. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2<sup>4</sup>.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.<sup>5</sup> On December 14, 2020, the WHO admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive<sup>6</sup>. Feb 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable<sup>7</sup>. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing<sup>8</sup>. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”<sup>9</sup> On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason<sup>10</sup>. On May 10<sup>th</sup>, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.<sup>11</sup>

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<sup>9</sup> <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

1. The Nuremberg Code,<sup>12</sup> to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment;
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,<sup>13</sup> and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy;
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada,<sup>14 15 16</sup> is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible;
4. Most vaccines are trialed for at least 5-10 years,<sup>17</sup> and COVID-19 treatments have been in trials for one year;
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models;<sup>18</sup>
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart<sup>19</sup>, and antibody dependent enhancement leading to death; this includes children ages 12-17 years old.<sup>20</sup>

Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study<sup>21</sup> on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood;

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<sup>12</sup> [https://media.tghn.org/medialibrary/2011/04/BMJ\\_No\\_7070\\_Volume\\_313\\_The\\_Nuremberg\\_Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf)

<sup>13</sup> <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

<sup>14</sup> <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

<sup>15</sup> <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

<sup>16</sup> [https://www.pfizer.com/news/hot-topics/the\\_facts\\_about\\_pfizer\\_and\\_biontech\\_s\\_covid\\_19\\_vaccine](https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine)

<sup>17</sup> <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

<sup>18</sup> <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

<sup>19</sup> <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

<sup>20</sup> <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

<sup>21</sup> <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugg>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.<sup>22</sup> In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death;
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: “use in paediatric (age 0-18)”, “use in pregnant and breastfeeding women”, “long-term safety”, “long-term efficacy” including “real-world use”, “safety and immunogenicity in subjects with immune-suppression”, and concomitant administration of non-COVID vaccines.”

Under the Risk Management plan section of the Summary Basis of Decision,<sup>23</sup> it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease).” In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, “the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including The World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)<sup>24</sup>.”

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined<sup>25</sup>.

It is further reported that only one percent of vaccine injuries are reported to VAERS,<sup>26</sup> compounded by several months delay in uploading the adverse events to the VAERS database<sup>27</sup>.

On May 21, 2021, VAERS data release (in the USA alone) showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week<sup>28</sup>.

Dr. McCullough, a highly cited Covid doctor, came to the stunning conclusion that the government was “...scrubbing unprecedented numbers of injection-related-deaths.” He further added, “...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market<sup>29</sup>.”

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported;
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**<sup>30 31</sup>

<sup>22</sup> <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

<sup>23</sup> <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

<sup>24</sup> <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

<sup>25</sup> <https://vaccineimpact.com/2021/cdc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-vaers/>

<sup>26</sup> [https://www.lewrockwell.com/2019/10/no\\_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/](https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/)

<sup>27</sup> <http://vaxoutcomes.com/thelatestreport/>

<sup>28</sup> <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

<sup>29</sup> <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

<sup>30</sup> <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

<sup>31</sup> <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Under the *Crimes Against Humanity and War Crimes Act of Canada*<sup>32</sup>, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,<sup>33</sup> a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,<sup>34</sup> to endanger the life of another person. Sections 216, 217, 217.1 and 221.

### **Duty of persons undertaking acts dangerous to life**

**Sec. 216:** Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

### **Duty of persons undertaking acts**

**Sec. 217:** Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

### **Duty of persons directing work**

**Sec. 217.1:** Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

### **Causing bodily harm by criminal negligence**

**Sec. 221:** Every person who by criminal negligence causes bodily harm to another person is guilty of  
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,  
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,<sup>35</sup> the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. *Hopp* also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.<sup>36</sup>

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<sup>32</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

<sup>33</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

<sup>34</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

<sup>35</sup> <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

<sup>36</sup> <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

Vaccination is voluntary in Canada. The federal and provincial governments have made it clear that getting the COVID-19 injections will not be mandatory. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose this experimental medical treatment upon their employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms<sup>37</sup> (1982)** Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights<sup>38</sup> (2005)**
- **Nuremberg Code<sup>39</sup> (1947)**
- **Helsinki Declaration<sup>40</sup> (1964, Revised 2013) Article 25, 26**

According to top constitutional lawyer, Rocco Galati, “both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable.”<sup>41</sup>

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation<sup>42</sup>. For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

In conclusion, administration of vaccines is defined as a “ medical procedure”. In what other medical context could non-doctors and non-pharmacists prescribe, promote and help distribute pharmaceutical drugs? This is unauthorized practice of medicine.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to participate in the COVID-19 experimental treatments.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Source: Action4Canada.com

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<sup>37</sup> <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

<sup>38</sup> <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

<sup>39</sup> <http://www.cirp.org/library/ethics/nuremberg>

<sup>40</sup> <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

<sup>41</sup> <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

<sup>42</sup> <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

## **“Vaccine” Notice of Liability Elected/Appointed Officials**

On Notice To: \_\_\_\_\_

**Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public**

**This is your official and personal Notice of Liability.**

**As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.**

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.<sup>1</sup>

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus<sup>2</sup>. Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

**Whereas:**

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<sup>12</sup> [https://media.tghn.org/medialibrary/2011/04/BMJ\\_No\\_7070\\_Volume\\_313\\_The\\_Nuremberg\\_Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf)

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<sup>16</sup> [https://www.pfizer.com/news/hot-topics/the\\_facts\\_about\\_pfizer\\_and\\_biontech\\_s\\_covid\\_19\\_vaccine](https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine)

<sup>17</sup> <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

<sup>18</sup> <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

<sup>19</sup> <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

<sup>20</sup> <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

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7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.<sup>22</sup> In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
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It is further reported that only one percent of vaccine injuries are reported to VAERS,<sup>26</sup> compounded by several months delay in uploading the adverse events to the VAERS database.<sup>27</sup>

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Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was “...scrubbing unprecedented numbers of injection-related-deaths.” He further added, “...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market.<sup>29</sup>”

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.

11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**<sup>30 31</sup>

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Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*<sup>32</sup>, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,<sup>33</sup> a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,<sup>34</sup> to endanger the life of another person. Sections 216, 217, 217.1 and 221.

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<sup>32</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

<sup>33</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

<sup>34</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

### **Duty of persons undertaking acts dangerous to life**

**Sec. 216:** Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

### **Duty of persons undertaking acts**

**Sec. 217:** Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

### **Duty of persons directing work**

**Sec. 217.1:** Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

### **Causing bodily harm by criminal negligence**

**Sec. 221:** Every person who by criminal negligence causes bodily harm to another person is guilty of  
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,  
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,<sup>35</sup> the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.<sup>36</sup>

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**<sup>37</sup> (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**<sup>38</sup> (2005)
- **Nuremberg Code**<sup>39</sup> (1947)
- **Helsinki Declaration**<sup>40</sup> (1964, Revised 2013) Article 25, 26

<sup>35</sup> <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

<sup>36</sup> <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

<sup>37</sup> <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

<sup>38</sup> <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

<sup>39</sup> <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine<sup>41</sup>.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Source: Action4Canada.com

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<sup>40</sup> <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

<sup>41</sup> <https://www.bitchute.com/video/W5qSPiy1onXt/>

## **“Vaccine” Notice of Liability Parent/Child**

To: School Superintendents, Heads of Schools/Universities/Colleges, School Board Executives, Directors, Principals, Teachers, Deans and Administration

**Attention:** \_\_\_\_\_

**Re: COVID-19 injections recommended or administered to minors (under 19 years of age)**

**This is your official and personal Notice of Liability.**

**As a person involved in the education system, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by prescribing, recommending, facilitating and using coercion to insist minors submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as “vaccine”.**

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.<sup>1</sup>

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus<sup>2</sup>. Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives<sup>3</sup>. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2<sup>4</sup>.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.<sup>5</sup> On December 14, 2020, the WHO admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive<sup>6</sup>. Feb 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable<sup>7</sup>. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing<sup>8</sup>. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”<sup>9</sup> On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason<sup>10</sup>. On May 10<sup>th</sup>, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.<sup>11</sup>

<sup>1</sup> <https://www.bitchute.com/video/nQgq0BxXfZ4f>

<sup>2</sup> <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

<sup>3</sup> <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

<sup>4</sup> <https://cormandrogenreview.com/report/>

<sup>5</sup> <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

<sup>6</sup> <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

<sup>7</sup> <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

<sup>8</sup> <https://greatgameindia.com/austria-court-pcr-test/>

<sup>9</sup> <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

<sup>10</sup> <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

<sup>11</sup> <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

**Whereas:**

1. The Nuremberg Code,<sup>12</sup> to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment;
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,<sup>13</sup> and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy;
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada,<sup>14 15 16</sup> is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible;
4. Most vaccines are trialed for at least 5-10 years,<sup>17</sup> and COVID-19 treatments have been in trials for one year;
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models;<sup>18</sup>
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart<sup>19</sup>, and antibody dependent enhancement leading to death; this includes children ages 12-17 years old.<sup>20</sup>

Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study<sup>21</sup> on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood;

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<sup>12</sup> [https://media.tghn.org/medialibrary/2011/04/BMJ\\_No\\_7070\\_Volume\\_313\\_The\\_Nuremberg\\_Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf)

<sup>13</sup> <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

<sup>14</sup> <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

<sup>15</sup> <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

<sup>16</sup> [https://www.pfizer.com/news/hot-topics/the\\_facts\\_about\\_pfizer\\_and\\_biontech\\_s\\_covid\\_19\\_vaccine](https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine)

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Children have already been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, and segregation through the COVID-19 measures and are therefore even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 “vaccine” curriculum, which is biased, prejudicial, and is a form of undue influence on any minor child. The curriculum excludes full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, “full” disclosure cannot be provided.

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Under sections 265 and 266 of the Criminal Code of Canada,<sup>33</sup> a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,<sup>34</sup> to endanger the life of another person. Sections 216, 217, 217.1 and 221.

### **Duty of persons undertaking acts dangerous to life**

**Sec. 216:** Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

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### **Duty of persons undertaking acts**

**Sec. 217:** Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

### **Duty of persons directing work**

**Sec. 217.1:** Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

### **Causing bodily harm by criminal negligence**

**Sec. 221:** Every person who by criminal negligence causes bodily harm to another person is guilty of  
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,  
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,<sup>35</sup> the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

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<sup>32</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

<sup>33</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

<sup>34</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

<sup>35</sup> <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." Hopp v Lepp, supra; Bryan v Hicks, 1995 CanLII 172 (BCCA); British Columbia Women's Hospital Center, 2013 SCC 30.<sup>36</sup>

Vaccination is voluntary in Canada. The federal and provincial governments have made it clear that getting the COVID-19 injections will not be mandatory. Educators are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose this experimental medical treatment on minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**<sup>37</sup> (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**<sup>38</sup> (2005)
- **Nuremberg Code**<sup>39</sup> (1947)
- **Helsinki Declaration**<sup>40</sup> (1964, Revised 2013) Article 25, 26

All Canadian law, contrary to misinformation spread by the WHO, does not allow for "implied consent." The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine<sup>41</sup>.

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

It is the responsibility of parents/legal guardians, not of principals, teachers, teacher assistants, school board executives or other adults with influence on children, to make medical decisions for them.

We hereby notify all school staff, school board members and executives, and any other adults who may have access to children while under their care, including the assistance of outside school staff, or contractors such as public health nurses, fire fighters, pharmacists, or health officials, that they will be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of encouraging, facilitating, coercing, or administering these experimental injections to children in your care.

\_\_\_\_\_  
Name of Parent/Guardian (print)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Student Name:

\_\_\_\_\_  
Date

Source: Action4Canada.com

<sup>36</sup> <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

<sup>37</sup> <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

<sup>38</sup> <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

<sup>39</sup> <http://www.cirp.org/library/ethics/nuremberg>

<sup>40</sup> <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

<sup>41</sup> <https://www.bitchute.com/video/W5qSPiy1onXt/>



## **“Vaccine” Notice of Liability Post-Secondary Educational Institutions**

To: Heads of Trade Schools/Art Schools/Universities/Colleges, including Presidents, Executives, Directors, Deans, Instructors, Professors, Superintendents, Administrators, Student Unions/Councils, and anyone else involved in Post-Secondary Educational Institutions, Universities, Trade Schools, Colleges, and the like.

**Attention:** \_\_\_\_\_

**Re: COVID-19 injections recommended or administered to students including minors (under 19 years of age)**

**This is your official and personal Notice of Liability.**

**As a person involved in the education system, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist students, including minors, submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.**

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season<sup>1</sup>.

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses<sup>2</sup>. Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person”.

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives<sup>3</sup>. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2<sup>4</sup>.

In November 2020, a Portuguese court ruled that PCR tests are unreliable<sup>5</sup>. On December 14, 2020, the WHO admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive<sup>6</sup>. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable<sup>7</sup>. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing<sup>8</sup>. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter<sup>9</sup>”. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason<sup>10</sup>. On May 10<sup>th</sup>, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses<sup>11</sup>.

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<sup>1</sup> <https://www.bitchute.com/video/nQgq0BxXfZ4f>

<sup>2</sup> <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

<sup>3</sup> <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

<sup>4</sup> <https://cormandrostenreview.com/report/>

<sup>5</sup> <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

<sup>6</sup> <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

<sup>7</sup> <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

<sup>8</sup> <https://greatgameindia.com/austria-court-pcr-test/>

<sup>9</sup> <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

<sup>10</sup> <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

<sup>11</sup> <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

**Whereas:**

1. The Nuremberg Code<sup>12</sup>, to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023<sup>13</sup>, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved. They have only been granted emergency use authorization by the FDA, which Health Canada<sup>14 15 16</sup>, is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years<sup>17</sup>, and COVID-19 treatments have been in trials for less than one year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market due to antibody-dependent enhancement, which resulted in severe illness and death in animal models<sup>18</sup>.
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart<sup>19</sup>, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old<sup>20</sup>.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study<sup>21</sup> on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

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<sup>12</sup> [https://media.tghn.org/medialibrary/2011/04/BMJ\\_No\\_7070\\_Volume\\_313\\_The\\_Nuremberg\\_Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf)

<sup>13</sup> <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

<sup>14</sup> <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

<sup>15</sup> <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

<sup>16</sup> [https://www.pfizer.com/news/hot-topics/the\\_facts\\_about\\_pfizer\\_and\\_biontech\\_s\\_covid\\_19\\_vaccine](https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine)

<sup>17</sup> <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

<sup>18</sup> <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

<sup>19</sup> <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

<sup>20</sup> <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

<sup>21</sup> <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood plasma.

7. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399<sup>22</sup>. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively<sup>22</sup>. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: “use in paediatric (age 0-18)”, “use in pregnant and breastfeeding women”, “long-term safety”, “long-term efficacy” including “real-world use”, “safety and immunogenicity in subjects with immune-suppression”, and concomitant administration of non-COVID vaccines”.

Under the Risk Management plan section of the Summary Basis of Decision<sup>23</sup>, it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)”. In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, “the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)<sup>24</sup>”.

9. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined<sup>25</sup>. It is further reported that only one percent of vaccine injuries are reported to VAERS<sup>26</sup>, compounded by several month’s delay in uploading the adverse events to the VAERS database<sup>27</sup>.

On July 16, 2021, VAERS data release showed 463,457 reports of adverse events following COVID-19 injections, including 10,991 deaths and 48,385 serious injuries, between December 14, 2020, and July 16, 2021, and that adverse injury reports among 12-17-year old’s more than tripled in one week<sup>28</sup>.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was “...scrubbing unprecedented numbers of injection-related-deaths”. He further added, “...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it’s pulled off the market<sup>29</sup>”.

10. Canada’s Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported here.

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<sup>22</sup> <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

<sup>23</sup> <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

<sup>24</sup> <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

<sup>25</sup> <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

<sup>26</sup> [https://www.lewrockwell.com/2019/10/no\\_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/](https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/)

<sup>27</sup> <http://vaxoutcomes.com/thelatestreport/>

<sup>28</sup> <https://childrenshealthdefense.org/defender/vaers-deaths-injuries-reported-cdc-covid-vaccines-moderna-pregnant-women/>

<sup>29</sup> <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

**11. Safe and effective treatments and preventive measures already exist for COVID-19, aside from the experimental shots, yet the government is prohibiting their use<sup>30 31</sup>.**

Young adults have already been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, and segregation through the COVID-19 measures and are, therefore, even more susceptible to being influenced by those in authority. Educational institutions support COVID-19 “vaccine” information, which is biased, prejudicial, and is a form of undue influence. The information offered about the injections excludes full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, “full” disclosure cannot be provided.

Under the *Crimes Against Humanity and War Crimes Act of Canada*<sup>32</sup>, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

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**Duty of persons undertaking acts dangerous to life**

**Sec. 216:** Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.  
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**Sec. 217.1:** Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

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(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,  
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<sup>30</sup> <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

<sup>31</sup> <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

<sup>32</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

<sup>33</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

<sup>34</sup> <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

<sup>35</sup> <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

The duty of disclosure for informed consent is rooted in an individual’s right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, “A Reasonable Person Would Want to Know the Serious Risks, Even if Remote”. Hopp v Lepp, supra; Bryan v Hicks, 1995 CanLII 172 (BCCA); British Columbia Women’s Hospital Center, 2013 SCC 30<sup>36</sup>.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

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All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent”. The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine<sup>41</sup>.

**Vaccination is voluntary in Canada.** The federal and provincial governments have made it clear that getting the COVID-19 injections will not be mandatory. Educators are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose this experimental medical treatment on students, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

It is the responsibility of adult individual students and the parents/legal guardians of those students who are minors, not of presidents, deans, professors, instructors, administrators, board executives or other persons in authority, to make medical decisions for students.

Therefore, I hereby notify you that you will be held personally, civilly, and criminally liable for any injuries or death that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections.

Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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<sup>36</sup> <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

<sup>37</sup> <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

<sup>38</sup> <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

<sup>39</sup> <http://www.cirp.org/library/ethics/nuremberg>

<sup>40</sup> <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

<sup>41</sup> <https://www.bitchute.com/video/W5qSPiy1onXt/>