***INSTRUCTION PAGE i***



**Following is a generic template letter** that can be used in the situation where you have been requested to undergo an invasive and unreliable PCR test. For example, the situation in which this might arise is where you have been contacted by a contact tracer because you were at a place of interest.

If you have been forwarded this letter by a friend, family member or colleague then please go to <https://voicesforfreedom.co.nz/resources> to see the other letters regarding PCR tests that may be more specific to your situation, masks and vaccination.

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| Disclaimer: It is a strict condition of reading and/or using this letter in any way you irrevocably agree that you are bound by the terms and conditions of this disclaimer. If you do not agree with the terms and conditions of this disclaimer, you are prohibited for reading and/or using this letter. Notwithstanding anything in this letter, the information set out in this letter is for general information only, and should not be construed as legal advice and/or health advice. No client-solicitor relationship is created whatsoever. Before taking any action based on this letter, you should consider your personal situation and seek professional legal advice. You acknowledge and agree that you were advised to take legal advice prior to using any information in this letter. If you use this letter and/or any information in the letter you acknowledge and agree that you have relied on your own judgement and initiative and not in reliance of anything else. The reader and/or user of this letter agrees to protect, indemnify, defend, and save harmless the author absolutely from and against any and all damages, claims, losses, demands, liabilities (including vicarious liability), injuries, suits, actions, judgements, costs, and expenses of any kind whatsoever (including reasonable legal fees) arising out of or in any way connected with this letter and the information contained within. Any person and/or persons that shares this letter without this disclaimer accepts full liability for any damage whatsoever caused.If you are sharing this document with others, you acknowledge and agree that you are prohibited from removing this disclaimer. The disclaimer may only be removed once the letter is ready to be sent by the person sending it. You are also prohibited from amending the letter other than the sections identified for you to add to and you acknowledge and agree to this. If, however, you would like to use parts of this letter in a letter that you draft yourself then you are permitted to do so.  |

***INSTRUCTION PAGE ii***



**What are your rights?**

There are two types of contacts, Casual Contact and Close Contact.

1. If you are a **Casual Contact**, just self-monitor for symptoms and only get a test unless you develop symptoms.[[1]](#footnote-2)
2. **Close Contacts** and those that have been in a **place of interest[[2]](#footnote-3)** are required to comply with: Direction under section 70 of the Health Act 1956 relating to Close Contacts and Locations of Interest and are required to be tested for COVID-19[[3]](#footnote-4). Acceptable testing for this is either by PCR test or RAT test as per the updated guidance for testing document issued by MOH: [COVID-19 Testing Guidance for the health sector – 3 February to 16 March 2022 (PDF, 153 KB)](https://www.health.govt.nz/system/files/documents/pages/testing_guidance_for_3_feb_to_16_mar_2022_-_final_revised_4_feb_2022.pdf)

**HOW TO USE THIS LETTER?**

1. Read the letter carefully so that you understand what you are sending – this letter is your letter.
2. The points you need to complete or closely consider for your situation are highlighted yellow. Keep this information factual and do not hesitate to get it checked by a friend, colleague or family member.
3. This letter is a generic letter to be used in the situation where you are responding to a request to obtain a PCR test.
4. Check to make sure that the current Order is still current. The current Orders are available at <https://covid19.govt.nz/alert-levels-and-updates/legislation-and-key-documents/>
5. If you have another situation where you are refusing a PCR test, then please refer to the other template letter go to <https://voicesforfreedom.co.nz/resources>
6. Sign off the letter.
7. Print or email the letter – make sure you keep a copy. **DO NOT** include these first four pages of instructions with your letter.

**YOUR header name/ contact details**

**[Contact details of person who has asked you to undergo a PCR**

**Address**

**Address]**

[Date]

FOR: [The Manager | Executive Board]

**RT-PCR TESTING REQUEST**

1. I refer to your notification of [date] that I may have been at a location of interest.
2. I confirm that I will attend a testing centre for testing and medical examination.
3. I will not however, undergo a PCR test that takes an invasive nasopharyngeal (back of nose) swab/s.
4. I do consent to a: [you can choose one or leave in both]
	1. PCR mouth swab or the taking of saliva in a saliva test, which are acceptable alternatives under section 9 of the COVID-19 Public Health Response (Required Testing) Amendment Order 2021 (**Order**);
	2. a Rapid Antigen test, which is acceptable pursuant to the [COVID-19 Testing Guidance for the health sector – 3 February to 16 March 2022 (PDF, 153 KB)](https://www.health.govt.nz/system/files/documents/pages/testing_guidance_for_3_feb_to_16_mar_2022_-_final_revised_4_feb_2022.pdf).

Yours faithfully

**Your Name**

**Your contact details**

1. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-health-advice-public/contact-tracing-covid-19> [↑](#footnote-ref-2)
2. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-health-advice-public/contact-tracing-covid-19/covid-19-contact-tracing-locations-interest> [↑](#footnote-ref-3)
3. <https://www.health.govt.nz/system/files/documents/pages/section-70-contacts-transport_3_feb_2022_dg_signed.pdf> [↑](#footnote-ref-4)