CIRCLE OF GRACE PARENT OPT-OUT FORM

• I understand that our parish or school is scheduled to present lessons from the Circle of Grace program to children in an effort to help create and maintain safe environments for children.

• I understand that this faith-based curriculum teaches that each person is sacred and encourages children to have greater respect for themselves and others.

• I am also aware that the lessons include personal safety information specifically regarding child abuse, child sexual abuse and Internet safety, and that children will receive instructions about what to do if they are harmed, or perceive potential harm, in any way by another person.

• Further, I have been offered the opportunity to review the materials to be presented and discuss the lessons with our parish or school.

After prayerful consideration;

• I have decided to exercise my right to have my child excluded from participation in the Circle of Grace lesson.

• I understand this “opt-out” form must be submitted to the parish before the lesson is scheduled to take place.

• I understand that this is the only class I can opt-out from the school year calendar and this will not affect my child’s attendance record.

• I understand that this form is valid for the current school year only.

Name of Child: _______________________________________ Grade Level: ________________
Name of Child: _______________________________________ Grade Level: ________________
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Name of Child: _______________________________________ Grade Level: ________________
Parent/Guardian Name: _____________________________________________________________
Phone: _____________________________________________________________
Parent/Guardian Signature: ___________________________________ Today’s Date: __________

Please provide materials so that I might teach the information to my child at home.
I do not wish to receive any materials.