

*Immaculate  
Conception*

CENTERED AROUND  
JESUS CHRIST

*Nativity*

27528 Patrick St., Madison Lake MN 56063

200 Main Street, Cleveland MN 56017

**PARENT OPTION FORM**  
**(For Personal Safety Instructions Programs)**

Dear Parent/Guardian,

Complete the form below ONLY if you choose to assume the full responsibility for education your child about personal safety both in real life interactions and in the cyber world.

Sign and return this form to the prior to February 10<sup>th</sup>, 2020:

Parish Office, C/O: D.R.E., 27528 Patrick Street, Madison Lake, MN 56063.

*Please include each child's name and grade for ALL children in your family that you wish to excuse.*

----- (PLEASE CUT HERE) -----

Dear Parish / School Leaders:

My child(ren) did not participate in the personal safety program taught at the Church of the Immaculate Conception of Marysburg and the Church of the Nativity in January 2020.

CHILD'S NAME *(Please print.)*

GRADE LEVEL

- |    |       |       |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |

In choosing to have my child(ren) excused from these classes that occurred in January, I understand that it is my responsibility to share with my child(ren) personal safety rules I deem appropriate.

\_\_\_\_\_  
Parent / Guardian Name *(Please print.)*

\_\_\_\_\_  
Parent / Guardian Name *(Please print.)*

\_\_\_\_\_  
Date