



**Protection of Children and Youth Initiative**

**Parent Option Form**

**Grade 5- Grade 8: The *Out of Harms Way* Program**

Complete, sign, and return this form to the Director of Faith Formation Erin Schueller.

***Complete a separate form for any additional children in your family you wish to excuse.***

This form is only to be completed ***only*** if you choose to assume full responsibility for educating your child about personal safety.

To Whom It May Concern:

I ***do not*** wish to have my child participate in the *Out of Harms Way* program for children in grade five through eight. In choosing to have my child excused from these classes, I understand that it is my responsibility to share with my child personal safety rules I deem appropriate.

\_\_\_\_\_  
Parent/ Guardian Name  
*(Please Print)*

\_\_\_\_\_  
Child's Name and Grade Level  
*(Please Print)*

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

\_\_\_\_\_  
Date