

Handout 9

PARENT/CAREGIVER AND CHILD ORIENTATION

PARENT/CAREGIVER COMMITMENT FORM

I/We give _____
child(ren)'s name(s)
permission to participate in *Our Whole Lives: Sexuality Education for Grades 4–6*,
part of the education program at _____
(name of organization or congregation)

I/We have been offered the opportunity to view the materials to be used in this program.

I/We have attended the Parent/Caregiver and Child Orientation for this program.

I/We will do my/our best to read and discuss each week's topics and HomeLinks.

Becoming responsible partners in sexuality education requires facilitators and parents/caregivers to create a safe and healthy environment of trust and respect. Our Whole Lives facilitators agree to abide by this organization's/congregation's code of ethics, which includes this state's/province's mandate to report cases of abuse. I/We understand that appropriate feedback will be provided to me/us should the need arise, and that all such exchanges will include the appropriate professional leaders of this organization.

Signed _____
(parent/guardian)

Please print information below:

Name _____

Address _____

Daytime Phone _____

Evening Phone _____

Cell Phone _____

E-mail _____

Date Signed _____