

PARENT/CHILD ORIENTATION PROGRAM

PARENT COMMITMENT FORM

I/We give _____
chil(ren)'s name(s)

permission to participate in *Our Whole Lives: Sexuality Education for Grades 4-6*, part of the education program at the Unitarian Universalist Church of Palo Alto.

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

I/We have attended a parent/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 leaders and parents to create a safe and healthy environment of trust and respect. *Our Whole Lives* leaders agree to abide by this organization'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)

Signed _____
(parent/guardian)

Name _____
(print)

Name _____
(print)

Address _____

Address _____

Email: _____

Email: _____

Phone Number

Phone number

Daytime _____

Daytime _____

Evening _____

Evening _____

Date signed _____

Date signed _____