

PARENT/CHILD ORIENTATION PROGRAM

PARENT COMMITMENT FORM

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

permission to participate in Our Whole Lives: Sexuality Education for Grades K-1, part of the education program at the Unitarian Universalist Church of Palo Alto.

I/We understand that the program includes age-appropriate sexuality education materials. I/We have been offered the opportunity to view these materials. 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 _____