FROM:	Holy Rosary School
SUBJECT:	Opportunity to "opt your child out" of the Touching Safety program
DATE:	October, 2018
our students Children™ pr by the [NAME	will present a sexual abuse prevention program, the <i>Touching Safety</i> program, to during the month of October, 2018. The creators of the <i>Protecting God's</i> rogram developed the <i>Touching Safety</i> program. This program is provided to us E of archdiocese or diocese], and is a part of our ongoing effort to help create and afe environment for children and to protect all children from sexual abuse.
the right to ch "overview" ar If you have q mpodell@hol please comp	ed lesson is being offered to all students at Holy Rosary. As a parent, you have noose whether your student participates. We encourage you to read the attached and "lesson plan" so you'll be aware of the nature of the <i>Touching Safety</i> program. Lestions about the program or the lesson, please contact Mrs. Podell at lyrosaryws.org. If you determine that you DO NOT want your child to participate, lete the "opt-out" form at the bottom of this page, and return it to your child's ter than October 11 th , 2018.
For more info	ormation on the <i>Touching Safety</i> program, visit the VIRTUS <i>Online</i> ™ website at rg.
Opt-out forn	n for use with the Touching Safety program:
Holy Rosary	does not have my permission to present the Touching Safety program, to my child
whose name	is:
Parent's nar	ne (printed):
Parent'	s Signature:
	Date:

TO:

Parents