



Date: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Class: \_\_\_\_\_

### **THE GROWING YEARS (GY) PROGRAMME FOR YEAR 2016**

#### **For Parents who wish to opt their child out of the Growing Years programme**

1. I would like to withdraw my child from the Growing Years Programme for 2016.

2. My reason(s) for my decision to opt my child out of the programme:

- Religious reasons
- My child is too young.
- I would like to personally educate my child on sexuality matters.
- I do not think it is important for my child to attend Sexuality Education lessons.
- I have previously taught my child the topics in the GY Programme for this year.
- I am not comfortable with the topics covered in the GY Programme for this year.
  
- Others: \_\_\_\_\_

3. Thank you.

\_\_\_\_\_  
*Parent's Signature*

\_\_\_\_\_  
*Contact No. (mobile)*

