

**[Parent Opt-out Form –This section is applicable only if parents wish to opt their child out of the Growing Years programme.]**

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

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

Parent of (Child's name): \_\_\_\_\_

Ms Foong Yin Wei

Angsana Primary School

Dear Principal

**THE GROWING YEARS PROGRAMME FOR YEAR 2018**

1. I would like to withdraw my child, \_\_\_\_\_, of  
(full name of child)  
\_\_\_\_\_ from the *Growing Years* programme for 2018.  
(class of child)

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 Name & Signature*

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

\_\_\_\_\_  
*Email address (optional)*