

**Opt Out Letter for Parents who do not wish to have their child participate in the Archdiocesan
Personal Safety Education Program**

Please fill out and return to:

Holy Mothers Collaborative

Religious Education Office
392 Hanover St.
Hanover, MA 02339

This letter is to confirm that I **do not** wish to have my child/children participate in the personal safety education program offered at the Holy Mothers Collaborative (St. Mary's and St. Helen's).

I understand that safety lessons and resource material are available in the Religious Education Office and will be provided to me upon request.

Parent Name: _____

Parent Signature: _____

Date: _____

My Child/Children's name/s	Grade
_____	_____
_____	_____
_____	_____
_____	_____