**Empowering God’s Children and Young People©**

**Permission Slip**

**2020 – 2021**

**To: [Parent or Guardian]**

**From: [Name of School, RE, Confirmation or Youth Program]**

**Subject: Empowering God’s Children and Young People© Safety Program**

**Date: [Date]**

We at **[Name of School, RE, Confirmation or Youth Program]** are committed to your child’s safety and well-being. There are daily reports of child abuse, both sexual and other forms in our society. Therefore, we recognize how important it is to “empower” our children and young people with the knowledge and understanding of ways to keep themselves and others safe from potential harm.

The *Empowering God’s Children and Young People© Safety Program* is provided by the Archdiocese of Los Angeles as an ongoing effort to educate children and young people through classroom lessons and activities on ways to maintain their own personal safety. It is based on catechetical principals to help them know they are loved by God and that He wants them to be healthy and safe.

The *Empowering God’s Children and Young People© Safety Program* will be presented to our students during the month of **[MONTH].**  The topics for this year’s lesson include **The Five Body Safety Rules, Safe and Unsafe Adults, and Internet Safety.**Each lesson includes video presentations, classroom discussion, individual and group activities, as well as a “Take Home Activity” for students to complete with a parent/guardian. A Summer Safety Lesson will also be presented at the end of each year.

Parents/guardians seeking additional information regarding this program or who would like to review the materials/videos, please feel free to contact **[Contact Name] [Contact Number]**.

**Name of School or RE, Confirmation or Youth Program**

***Empowering God Children and Young People© Safety Program***

**Parent Permission Slip**

**2020 – 2021**

I understand that for my child to participate in the *Empowering God’s Children and Young People© Safety Program,* I need to fill out and return this Parent Permission Form by **[DATE]**.I am specifically giving permission for the ***Empowering God Children and Young People© Safety Program*** to be presented to my child.

Child’s Name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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