

TO: Parents and Guardians

FROM: Safe Environment Coordinator at the Church of \_\_\_\_\_,  
in \_\_\_\_\_, MN

RE: **Opt-Out** form with attached **Overview** and  
**Teaching Boundaries and Safety Guide (Or Parish Web Site Referenced Access)**

DATE: \_\_\_\_\_, 2024

The Church of \_\_\_\_\_ will present the *Teaching Safety* program to students this fall. The creators of the *Protecting God's Children* for Adults program developed the *Teaching Safety—Empowering All God's Children* program. This sexual abuse prevention program is provided by the Diocese and is a part of our ongoing effort to help create and maintain a safe environment for children and to protect all children from sexual abuse. It is not sex education.

The scheduled lessons are being offered to all students in our parish/school. I encourage you to read the attached "Overview" and "Teaching Safety Guide" so you will be aware of the nature of the *Teaching Safety* program. If you have questions about the program or the lesson, please contact me directly. If you determine that you do not want your child to participate, please complete the "Opt-Out" information at the bottom of this page, and return the entire page to your child's teacher/catechist before the training.

For more information on the *Teaching Safety* program, visit the VIRTUS *Online*™ Web site at [www.virtus.org](http://www.virtus.org).

**(Return this form ONLY if you do NOT want your child to participate in the program.)**

**The Diocese of New Ulm does not have my permission** to present the *Teaching Safety* program to my child(ren) as listed below:

Name	Grade
_____	_____
_____	_____
_____	_____

who attend \_\_\_\_\_ in \_\_\_\_\_, MN. I acknowledge that I have been provided with access to the *Overview* and *Teaching Safety Guide*, and I take responsibility to instruct my child on the concepts contained in these documents. I will use the age appropriate *Lessons 1 and 2* to train my child on personal safety/safe environment provided to me by the parish upon receipt of this signed opt out form.

Parent/Guardian Name Printed: \_\_\_\_\_

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

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