



Our Lady of Mount Carmel School
530 Hot Springs Road
Santa Barbara, CA 93108-2098
805-969-5965

TO: Parents/Guardians
FROM: Our Lady of Mount Carmel School
DATE: April 19, 2013
SUBJECT: Opportunity to allow your child to participate in the Self-Protection Program

Our Lady of Mount Carmel School will be presenting a sexual abuse prevention program to our students on Monday, April 29. This Self-Protection program is a part of our ongoing effort to help create and maintain a safe environment for children and to protect all children and youth from sexual abuse.

As a parent/guardian, you have the right to choose whether your child participates. If you have questions about the program, please contact Mrs. Regan through the school office at 969-5965. If you determine that you DO, in fact, want your child to participate, please complete the "opt-in" Permission Form at the bottom of this sheet and return it to your child's teacher no later than Wednesday, April 24th, 2013.

Permission Form for use with Self-Protection Program

I am allowing my child to participate in the Self-Protection Program and am specifically requesting that Our Lady of Mount Carmel School present the program to my child whose name is:

(Please print)

Name of parent/guardian: _____
(Please print)

Signature of parent/guardian: _____

Date: _____

If you want to preview the materials or teach this program to your child yourself, Please see Mrs. Regan for an "Opt-Out" Form and related materials.