

**2005-06 St. Mary's Religious Education- CCD Program  
Formation in Christian Chastity Opt-In Form**

Student Name \_\_\_\_\_

Parent Names \_\_\_\_\_

2005-06 CCD Grade \_\_\_\_\_ (This form needed for 1<sup>st</sup> and 5<sup>th</sup>-8<sup>th</sup> grade only)

**I, \_\_\_\_\_, parent of \_\_\_\_\_,  
choose to:**

\_\_\_\_\_ **Opt-in (the child will attend the offered sessions)**

\_\_\_\_\_ **Opt-out (the child will NOT attend)**

**my child for the *Formation in Christian Chastity* program. I understand that these classes are not mandatory. I further understand that these classes deal with issues regarding child safety and topics regarding the dignity and value of the human person and the dignity of sexuality and the body using age-appropriate material. I also understand that these classes are not sex education classes and are not comparable to such classes as are found in public schools.**

**I am aware that all materials and curriculums have been made available to me online at [www.arlingtondiocese.org](http://www.arlingtondiocese.org) (full curriculum can be read and downloaded off this site).**

**Finally, I am aware that these classes will be taught by my child's CCD teacher on Sundays in April of 2006 from 11:15am-12:15pm immediately following the regular CCD classes.**

**Parent Signature: \_\_\_\_\_**

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