



Whole Group School Assembly

Parent/Guardian Opt-Out Form

We are excited to announce an upcoming assembly at our school that will focus on raising awareness equipping students with essential skills and knowledge to navigate various challenges they may encounter, empowering them to make informed decisions and lead healthy lives.

Our prevention programs are tailored to specific grade levels and age groups, ensuring that the content is both grade-specific and age-appropriate. Below is the assembly's title, date, and time of the assembly.

Assembly Title: _____

Date: _____

Time: _____

This assembly is an integral part of our ongoing efforts to promote a safe school environment where all students feel respected and valued. Through engaging presentations and interactive discussions, we aim to educate our students about the importance of kindness, empathy, and standing up against bullying behavior.

As partners in your child's education, we believe that your involvement and support are essential in reinforcing the messages conveyed during this assembly. **Therefore, if you prefer for your child not to participate in the assembly, please sign and return the bottom portion of this form to your child's school indicating you are opting out.**

I **DO NOT** GIVE CONSENT FOR MY CHILD TO PARTICIPATE IN THE ABOVE ASSEMBLY.

Student name: _____ Classroom Teacher: _____

School Name: _____ Grade Level: _____

Parent Guardian Name: _____

Parent or Guardian Signature: _____