

ST. CHARLES— ST. PETER— ST. ANTHONY

EST. 1887

EST. 1867

EST. 1893

St. Charles Borromeo Parish

713 South Van Ness Ave.
San Francisco, CA 94110
Tel. 415-824-1700
Fax No. 415-824-0844

St. Peter Parish

1200 Florida Street
San Francisco, CA 94110
Tel. 415-282-1652
Fax No. 415-282-6097

St. Anthony of Padua Church

3215 Cesar Chavez St.
San Francisco, CA 94110
Tel. 415-647-2704
Fax No. 415-647-7282

TO: Parents
FROM: Religious Education Program-Mission Parishes St. Peter, St. Antony and St. Charles
SUBJECT: Opportunity to “opt your child out” of the *Touching Safety* program
DATE: April 6, 2019

Religious Education Program-Mission Parishes St. Peter, St. Antony and St. Charles will present a sexual abuse prevention program, the *Touching Safety* program, to our students on April 13, 2019. The creators of the *Protecting God’s Children™* program developed the *Touching Safety* program. This program is provided to us by the VIRTUS of archdiocese of San Francisco, 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.

The scheduled lesson is being offered to all students at **Religious Education Program-Mission Parishes St. Peter, St. Antony and St. Charles**. As a parent, you have the right to choose whether your student participates. We encourage you to read “overview” and “lesson plan” so you’ll be aware of the nature of the *Touching Safety* program. If you have questions about the program or the lesson, please contact your son/daughter catechist by visiting the classroom on a Saturday before April 8th. If you determine that you DO NOT want your child to participate, please complete the “opt-out” form at the bottom of this page, and return it to your child’s teacher no later than April 8th.

For more information on the *Touching Safety* program, visit the VIRTUS *Online™* website at www.virtus.org or visit our webpage to view lesson plans. <https://missionparishes.com/> under Religious Education Virtus Lesson plans.

Opt-out form for use with the *Touching Safety* program:

Religious Education Program-Mission Parishes St. Peter, St. Antony and St. Charles does not have my permission to present the *Touching Safety* program, to my child whose name is

Parent’s name (printed): _____

Parent’s Signature: _____

Date: _____

**** NOTE**

**RETURN THIS FORM ONLY IF YOU DO NOT WANT YOUR CHILD TO RECEIVE THE LESSON
IF YOU AGREE THAT YOUR SON/DAUGHTER RECEIVES THIS CLASS YOU DO NOT NEED TO RETURN
THIS FORM.**