

(Address) 110 Woodlands Crescent Singapore 737803 (Main Line) 6365 4490 (Fax) 6365 4460 (MK line) 6362 7223 (Fax) 6362 4846 (Email) riverside_ps@moe.edu.sg (Pri Sch) mk_riverside@moe.edu.sg (MK)



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Annex A

PARENT OPT-OUT FORM – This section is applicable <u>ONLY</u> if parents wish to opt their child out of the Growing Years programme. It is to be submitted to the Form Teacher latest by Friday, 24 February 2023.

To: Mr Tony Tan, Riverside Primary School		
Dea	r Princ	cipal
1.	l w	ould like to withdraw my child,, of (full name of child)
	(c	, from Sexuality Education lessons for 2023. class of child)
2.	My r	eason(s) for my decision to opt my child out of the programme: Religious reasons
		My child is too young.
		I would like to personally educate my child on sexuality matters.
		I do not think it is important for my child to attend Sexuality Education.
		I have previously taught my child the topics in the Sexuality Education lessons for this year.
		I am not comfortable with the topics covered in the Sexuality Education lessons for this year.

Sparkling Together



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□ Others:		
Thank you		
Parent's Name & Signature:		
Parent's Email address:		
Parent's Contact No. (mobile)		
Child's Full Name:		
Criniu S i un Marrie.		
Child's Class:		
Date:		

Leadership, Enthusiasm, Sincerity