

MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

ANNEX A

To: Mr Wee Tat Chuen, Fairfield Methodist School (Secondary)

Dear Principal

1. I would like to withdraw my child, ______, of

(full name of child)

_____, from Sexuality Education lessons for 2024. (class of child)

- 2. My reason(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.
 - Others: ______

Thank you.

Parent's Name & Signature: _____

Parent's Contact No.	(mobile)	

Child's Full Name:	

Date: _____