



Norfolk Public Schools

The cornerstone of a proudly diverse community

FAMILY LIFE EDUCATION OPTION FORM

Check only one box and return to your child's school by:

(Date)

☐

I **do not** want my child to participate in the Family Life Education program.

☐

I **do not** want my child to participate in the following objectives: (Please list by objective number from previous page)

IF THIS FORM IS NOT RETURNED, YOUR CHILD WILL BE INCLUDED IN THE FAMILY LIFE EDUCATION PROGRAM.

Child's Name

Grade Level

Signature of Parent or Guardian

Student File Copy