



# Holy Trinity Catholic School

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**TO: Parents**  
**FROM: Holy Trinity School / Ms. Karen Lloyd - Principal**  
**SUBJECT: Children's Safety Program**  
**DATE: For the 2018 - 2019 School Year**

Holy Trinity School will present the Archdiocesan mandated sexual abuse prevention program, the *Touching Safety* program, to our students during 2 of its regularly scheduled religion classes during the month of February. The creators of the *Protecting God's Children*™ program developed the *Touching Safety* program. This program is provided to us by the Archdiocese of Los Angeles, and is a part of our ongoing effort to help create and maintain a safe environment for children.

The scheduled lesson is being offered to all students at Holy Trinity School as part of our obligation to meet the mandate of the United States Conference of Catholic Bishops to present a safe environment program to all of our children. As a parent, you have the right to choose whether your child participates. Please note – this is a **safety program**. This year's lesson focuses on basic safety rules and what to do when someone makes them feel uncomfortable. We encourage you to read the "overview" and "lesson plan" posted online 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 Ms. Lloyd at the school office.

If you have multiple children at the school, you will be asked to complete one form for **each** child.

For more information on the *Touching Safety* program, visit the VIRTUS *Online*™ website at <http://www.virtus.org>. or review the links to the program on our homepage at [www.holytrinityla.com](http://www.holytrinityla.com)

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## Holy Trinity School

\_\_\_\_\_ **Does** have my permission to present the *Touching Safety* program, to my child

\_\_\_\_\_ I would like to review the materials further and discuss my concerns with you.

\_\_\_\_\_ **Does not** have my permission to present the *Touching Safety* program to my child. I understand that I will receive the materials and will be responsible for training my child.

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

Parent's name (printed): \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_