

# PLEASE FILL IN ONE OF THE FOLLOWING OPTIONS

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RELIGIOUS INSTRUCTION IN SCHOOL: PARENT NOTICE FOR RELIGIOUS INSTRUCTION IN SCHOOL HOURS - Religion Identified RIS-C1

## **I WISH MY CHILD TO ATTEND THE RELIGIOUS INSTRUCTION PROGRAM**

Student Name: \_\_\_\_\_ Year: \_\_\_\_\_ Class: \_\_\_\_\_

I wish my child to attend the Religious Instruction Program provided by the school. My child's religion is: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

OR

RELIGIOUS INSTRUCTION IN SCHOOL: PARENT NOTICE FOR RELIGIOUS INSTRUCTION IN SCHOOL HOURS - Religion Identified RIS-C2

## **I WISH TO WITHDRAW MY CHILD FROM RELIGIOUS INSTRUCTION**

Student Name: \_\_\_\_\_ Year: \_\_\_\_\_ Class: \_\_\_\_\_

I do not wish my child to attend any of the programs provided by faith group/s at the school.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_