PART A:

Family Name: _________________________
Student Name/s: ____________________________________________________________

PART B: Parent to select and complete relevant option.

Member of a faith group providing religious instruction
Religion _________________________ (optional)
I give permission for my child to attend religious instruction lessons once a week. I have been informed and understand that my child will be allocated to the relevant group determined by my child’s age. I understand these lessons are presented by local ministers/instructors in the Monto District and my child is expected to act appropriately throughout this lesson.
Signature: ________________________        Date: __ ____________

Non-member of faith group/s providing religious instruction
Although not a member of the participating faith group/s I wish my child to attend the religious instruction.
Signature: ________________________        Date: __ ____________

Withdrawal from religious instruction
I do not wish my child to attend any of the lessons provided by a religious instructor at the school.
Signature: ________________________        Date: __ ____________