



## Episcopal Church of the Ascension

I, \_\_\_\_\_, parent/guardian, of \_\_\_\_\_,  
(print parent/guardian name) (print child's name)

understand that the nature of the “*Safeguarding God's Children*” course work is sensitive in nature due to its content of prevention of sexual abuse among children.

I give Church of the Ascension permission to send the course log-on information to my child to complete the course as a requirement for employment or volunteer consideration.

Signature: \_\_\_\_\_

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