Reality Check, Inc. P.O. Box 759 Rogers, AR 72757 479.426.1519 www.realitycheckinc.org

I understand that Reality Check, Inc. has been invited by my child's school to present the Everybody Changes Puberty program. I am aware that the information will be presented in groups of males and females separately. I am aware that topics discussed during the hour and a half presentation will include: General changes in adolescence (physical, mental, emotional), Development of the Reproductive Systems, Pregnancy, and Social Changes in adolescence. I **DO NOT** want my child to participate in this program.

Signature: Date:

Reality Check, Inc. P.O. Box 759 Rogers, AR 72757 479.426.1519 www.realitycheckinc.org

I understand that Reality Check, Inc. has been invited by my child's school to present the Everybody Changes Puberty program. I am aware that the information will be presented in groups of males and females separately. I am aware that topics discussed during the hour and a half presentation will include: General changes in adolescence (physical, mental, emotional), Development of the Reproductive Systems, Pregnancy, and Social Changes in adolescence. I **DO NOT** want my child to participate in this program.

Signature:	Date:

Reality Check, Inc. P.O. Box 759 Rogers, AR 72757 479.426.1519 www.realitycheckinc.org

I understand that Reality Check, Inc. has been invited by my child's school to present the Everybody Changes Puberty program. I am aware that the information will be presented in groups of males and females separately. I am aware that topics discussed during the hour and a half presentation will include: General changes in adolescence (physical, mental, emotional), Development of the Reproductive Systems, Pregnancy, and Social Changes in adolescence. I **DO NOT** want my child to participate in this program.

Signature:	Date: