**Safe and Healthy Relationships**

This program’s target population is for those individuals who do not meet the criteria for Juvenile Sex Offender Program, but are experiencing issues with inappropriate problematic sexual behaviors (i.e., sexting and cyber harassment/consent). The age requirements for this class are 7th grade to 12th grade. You will also learn about healthy relationships, safe dating, consent, and social media safety.

You will be required to attend all scheduled programs. The classes are scheduled for **Insert Date Here from 5:30-7:30pm** at The Center for Child and Family Advocacy’s Office. Failure to attend all classes will result in referral back to the court system and/or other referral source for non-compliance. The referral source will also receive any behavioral concerns and recommendations for further assessment.

As you know, parent involvement is very important in an adolescent’s life, therefore the last hour (6:30-7:30p) of the program on **Insert Date Here** will require parent/guardian involvement. Please have one or both parents/guardians attend that last hour of the program. Parents or guardian may be required to meet with the group facilitator individually at any given time to address concerns. This is a mandated requirement for your child to have successful completion. Therefore, your child is at risk for not successfully completing, if a parent does not attend the last class.

Your consent may reveal information that may be used by third parties to make decisions that could have significant effects on you or your child’s life. Third parties may include the courts, Probation or The Department of Job and Family Services. The Center for Child and Family Advocacy, Inc. is a mandatory reporter and the following disclosures DO NOT require authorization (e.g., child/elder abuse or neglect reporting). The Center for Child and Family Advocacy will take all necessary steps to protect individuals from harming themselves or others as required by law under court order. The Center for Child and Family Advocacy follows the Office of Civil Rights to determine compliance with the privacy rule.

By signing this statement, I have made a commitment to attend the scheduled classes on **Insert Date Here from 5:30-7:30pm.** By signing this I am acknowledging Informed Consent.

**Date**: **Time:** **5:30-7:30pm**

**Location:** The Center for Child and Family Advocacy, Inc.

 You will be notified if it will be at the Defiance or Napoleon office location.

**Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Participant Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Legal Guardian Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Referral Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_