

Dear Parents(s) or Guardian(s):

Now that we are about to finish our unit on Pregnancy and Childbirth, I would like to show childbirth videos to all of the Child Development classes. These videos do show the whole process of giving birth, both vaginally and by cesarean section. These videos are very educational and allows your daughter/son to see the reality of having a baby. I would like to have your approval for your daughter or son to watch these videos. If for some reason you do not want you daughter/son to watch this video, we will assign a quick research assignment in the Library during the class. Please sign below to give your approval for your daughter or son to watch this video.

Thank you,

Leslie Parker
FACS Teacher
Castle High School

I GIVE APPROVAL for my Daughter/Son to watch the childbirth video.

Child's Name: _____

Parent(s) Guardian(s) Signature: _____

I DO NOT GIVE APPROVAL for my Daughter/Son to watch the childbirth video.

Child's Name: _____

Parent(s) Guardian(s) Signature: _____