

SPEAK UP!



## PROJECT SPEAK UP! Opt-Out Form

**Parents:** Your student is invited to attend a special presentation of "SPEAK UP!" on  
Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

"SPEAK UP!" is an original, award-winning play written and performed by students that gives voice to some of the most troubling and traumatic issues facing young people today. The often-taboo topics of identity, sexual assault, harassment and suicide are brought to the stage in a powerful 25-minute presentation that serves as a catalyst for conversation afterward. Project SPEAK UP! seeks to educate and empower young people and to equip adults with the tools they need to listen and support them.

During its pilot phase in Orange County, California, the play was performed for audiences of doctors, mental health professionals and educators. They support Project SPEAK UP! as an educational tool to begin difficult conversations. While the play portrays intense experiences related to mental health, professionals recognize that many youth or their friends struggle with these issues; it is important to encourage conversations about these topics to prevent increased mental health risks.

[NAME OF SCHOOL] parents will have an opportunity to see the play and participate in a talk back on [DATE]. School faculty have already seen SPEAK UP! and have participated in a discussion and survey to assess mental health counseling needs here at our school. Faculty feedback at presenting schools is powerful and includes comments such as:

*[insert your own quotes or use:]*

*"It opened my eyes to accepting these issues are real and can occur...and to be prepared."*

*"This is more powerful than any speakers we've had."*

Our goal in presenting SPEAK UP! is to give student leaders the opportunity to share what they are hearing, seeing and experiencing in their peer communities. The post-presentation talk back and small group discussions will be led by *[identify qualified team members at your site, e.g.: school counselors and community mental health professionals.]* Student feedback will inform mental health and wellness strategies at our school as we work to advance our response capabilities within a framework of care on campus and in our school district.

For more information about Project SPEAK UP! and to review mental health statistics that frame the problem we are addressing, as well as, see more testimonials from parents and faculty, **please visit the Project SPEAK UP! website at: [www.theatreonpurpose.org](http://www.theatreonpurpose.org).**

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**Student attendance at this event is NOT mandatory. If you do not want your son/daughter to participate, you can OPT OUT by [DATE]. If you do not opt-out, your student will receive an invitation to the presentation with a link to RSVP. Attendance will be taken at the door.**

**OPT\_OUT for my student:** (student name) \_\_\_\_\_

**Name of Parent/Guardian(s):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Still have questions? Please contact:** *[name of organizer or counselor at your site]*