

TEEN ADVOCATES FOR SEXUAL HEALTH (TASH)
Planned Parenthood of the St. Louis Region
Parent/Legal Guardian Permission Form

Your son/daughter is applying to the **Teen Advocates for Sexual Health (TASH)**, a program of Planned Parenthood of the St. Louis Region. The first step in being selected is submitting a written application, followed by attending an informational meeting (Wed. September 16) and a secondary application. Acceptance is based on the written application, meeting attendance, secondary application and of most importance a demonstration of interest and commitment.

The mission of TASH is to improve the sexual health of adolescents throughout the St. Louis Community.

Teens Will Lead the Way: Teens have a keen sense of what needs to be done to improve situations that directly impact them. TASH is a selected group of approximately 40 teens, (grades 9-11), representing diverse backgrounds from St. Louis City and St. Louis County. *Meeting bi-monthly on Wednesdays, (2nd and 4th), from 4:45-7 PM* beginning in October, TASH seeks to improve the sexual health of St. Louis area youth by empowering teens to promote and create community conversations about adolescent sexual health needs. All activities---designed and conducted by teens---are built on the philosophy that teens have the right to a full range of information and education on sex and sexual health in order for them to make responsible choices. Teen Advocates for Sexual Health is an exciting, challenging opportunity, empowering teens to be agents for positive change.

Teen Advocates for Sexual Health meetings take place at Planned Parenthood, 4251 Forest Park Ave. Additional meetings may be required throughout the program. Teens are required (exceptions considered) to participate in a Saturday retreat in the fall and one in the winter.

To obtain further information about Teen Advocates for Sexual Health, contact Judy Lipsitz, program director at (314) 531-7526, ext. 339 or e-mail to Judy.lipsitz@ppslr.org.

*Please return the bottom portion along with your signature on the Application Form
Application Deadline-September 11, 2009*

My daughter/son _____ has my permission to apply to/and participate in Teen Advocates for Sexual Health sponsored by Planned Parenthood of the St. Louis Region. I understand the purpose and general content of the Teen Advocates for Sexual Health.

Parent/Legal Guardian Signature

Date