

Code of Conduct Acknowledgement

*This form is to be filled out by volunteers of the Archdiocese or a parish, to a ministry that is **not** considered to be a high risk ministry (as defined in Policy 5.1.1 of the Archdiocese of Grouard-McLennan's Policy Manual).*

Name: _____

Address: _____

Town/City: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

e-mail: _____

I have read and agree to abide by the Code of Conduct of the Archdiocese of Grouard-McLennan (see attached) as my commitment to serve and to be seen to serve all persons with purity and unselfish love in a Covenant of Care that honors the intrinsic worth of each person, and I acknowledge that any breach of the Code of Conduct on my part will result in appropriate disciplinary action.

Signature

Date