

RCCPC Covenant of Care

APPENDIX 3:

Statement of Agreement with the Covenant

AGREEMENT TO ADHERE TO THE COVENANT OF CARE

Employee, Worker or Volunteer Only

I have read, and I understand the Red Clay Creek Presbyterian Church Covenant of Care with Children and Youth (Covenant). I agree to carry out my responsibilities and duties to the extent reasonable and practicable in accordance with this Covenant.

Signature*

Date

If under 18, Signature of Parent or Guardian*

Date

**Form must be signed by a Parent or Guardian and Youth if volunteer is under 18.*

Mission Groups, organizations, or other outside groups using the facilities of Red Clay Creek Presbyterian Church Only

I have read, and I understand the Red Clay Creek Presbyterian Church Covenant of Care with Children and Youth (Covenant). I acknowledge that I am the party (we are the parties) responsible for this group's behavior. I agree to ensure that all people in my group will act in accordance with this Covenant.

Name (Please Print)

Organization Title

Signature

Date

Name (Please Print)

Name (Please Print)

Signature

Signature