

**Appendix P - Individual Form of Receipt**

I hereby acknowledge that I have received a copy of the Keeping God’s People Safe: Policies and Procedures Concerning Sexual Boundaries and that I understand the content of these Policies and Procedures.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date\_\_\_\_\_

(All clergy, all lay employees and all volunteers who regularly supervise youth activities, **including** unpaid Sunday School teachers, and vestry members shall be furnished with a copy of these Policies and shall complete and sign a certificate evidencing the receipt of these Policies. Each Congregation shall retain the receipts among its permanent records.)