



# The Diocese of Huron Anglican Church of Canada

Name \_\_\_\_\_

Title \_\_\_\_\_  
(clergy/employee/volunteer)

***Please initial each statement as appropriate.***

\_\_\_\_\_ I hereby acknowledge receipt of a copy of the Diocese of Huron Safe Church Policy brochure.

\_\_\_\_\_ I understand the contents of the Diocese of Huron Safe Church Policy located on the diocesan website.

\_\_\_\_\_ I understand that to function as an ordained or lay person in ministry implies that the Church has entrusted me with responsibility to act for the well-being of others.

\_\_\_\_\_ I have attended a Safe Church training workshop and/or have completed the online training programme <http://deaneryofessexsafechurch.yolasite.com>

Date of completion: \_\_\_\_\_ Place: \_\_\_\_\_

If you cannot check off any of the above statements or if you have questions about this, please contact the diocesan executive Archdeacon prior to signing off on this document.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Instructions: All ordained and lay staff are expected to comply with the Diocese of Huron Safe Church Policy. This signed form will be placed in the named person's personnel file or other suitable file if there is no personnel file. It will remain in the file for an indefinite period of*

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