

## **ST. ANDREW'S UNITED METHODIST CHURCH**

### **A Policy Statement for the Protection of Children and Youth**

St. Andrew's United Methodist Church (UMC) is a spiritual community which takes seriously our responsibility to provide a safe nurturing environment for children and youth who participate in our ministries. All volunteers and employees who are in leadership roles in these ministries are expected to honor the vows we take in baptism to nurture our children and youth in the Christian faith. Every church worker plays a key role in fostering the spiritual development of individuals and families in our church community.

In an effort to provide a safe community, St. Andrew's UMC expects all church workers to commit themselves to the Policy Statement for the Protection of Children and Youth as adopted by the Church Council. In doing so, church workers will be asked to provide personal information, review the church policy, and understand that they will be under the supervision of their respective leaders. Each Ministry Leader (i.e. Education, VIM, Youth and Athletics) will ensure that all volunteers including coaches that support these functions involving children and youth have completed the appropriate application forms contained in Section VIII.

The goals of the policies stated in this document include:

1. Protection of all children and youth using our facilities from all forms of abuse;
2. Protection of our Care Providers, both volunteers and paid staff, from false allegations of abuse; and
3. Protection of the integrity of our ministry.

In order to achieve these goals, St. Andrew's UMC has adopted and implemented these policies and procedures pertaining to the screening, supervision, training and education of Care Providers, as well as policies and procedures for reporting and responding to allegations of child abuse.

St. Andrew's UMC policy is to protect all children and youth participating in our ministry from all forms of abuse, whether it is physical, emotional, or sexual. It is also the policy of St. Andrew's to encourage everyone associated with our church to avoid even the *appearance* of such conduct, in order to prevent any potential misunderstandings which may give rise to false accusations against a Care Provider involving children/youth in our ministry.

This policy is made up of eight (8) parts:

- I. Definitions
- II. Standards of Conduct
- III. Recruitment and Selection of Church Workers
- IV. Supervision of Church Workers
- V. Reporting Procedures
- VI. Response to Allegations of Abuse
- VII. Care of Documents
- VIII. Personnel/Permission Forms

## **I. DEFINITION OF IMPORTANT TERMS**

Adult:	A person eighteen (18) years of age or older.
Applicant:	A person who is applying to be approved by St. Andrew's United Methodist Church as a Care Provider.
Appropriate Conduct:	Conduct which one could reasonably assume would be acceptable and permissible by the child's parent or guardian.
Child/Youth:	A person under eighteen (18) years of age.
Child Abuse:	Harm or perceived threatened harm to a child's health or welfare which occurs through non-accidental physical or mental injury; sexual abuse; sexual exploitation, sexual harassment; sexual molestation; disseminating, exhibiting or displaying sexually explicit material to children.
Child/Youth Care Providers:	All pastors, employees, lay leaders, counselors, volunteers (full/part time), and coaches who work in any capacity with children through St. Andrew's United Methodist Church and/or our facilities.
Constituent:	Active non-member participants in regular programs of the church.
Employee:	All paid church staff.
Facility User Care Provider:	Any person who, on behalf of an organization other than St. Andrew's UMC, provides any services, care, guidance or supervision for a child on the premises or in the facilities of St. Andrew's UMC.
Private:	One-on-one conversations, not intended to be overheard by another party.
Sexual Abuse:	Engaging in any sexual contact with a child; the sexual exploitation of a child; the sexual harassment of a child; the sexual molestation of a child and/or disseminating, exhibiting, or displaying sexually explicit material to a child, regardless of whether such conduct is with or without the knowledge or consent of the child. Sexual abuse may be violent or nonviolent. It includes sexual behaviors involving touching, such as fondling, as well as penetration, intercourse and rape. It also includes sexual behavior which does not include touching, such as sexually suggestive comments, obscene phone calls, exhibitionism, displaying pornographic material and allowing children to witness sexual activity.
Volunteer:	Any person, who is not a St. Andrew's United Methodist Church employee, providing any services, care, guidance, assistance or supervision for any child in a St. Andrew's United Methodist Church function, activity, event or program.

## **II. STANDARDS OF CONDUCT**

### **A. Permitted Conduct**

It is quite natural, appropriate and desirable for Christians to express and share their love and affection for each other and for Christ. This is considered essential in the healthy, emotional and spiritual well-being, growth and development of a loving and caring Christian community and environment such as St. Andrew's UMC. This sharing of Christian love is especially important to children for their normal healthy and happy growth and development. The expressing and sharing of one's Christian love to a child shall not be considered to be child abuse or in any way prohibited, restricted or limited by these policies.

The following conduct by a Care Provider shall be considered to be an expression of Christian love and not child abuse or even creating the appearance of child abuse:

1. Conversations which are conducted in very public and populated locations.
2. Friendly, healthy relationships with a child, which may include ongoing conversations which demonstrate interest in the child.
3. Infrequent or occasional private conversations with a child are acceptable if requested by the child. Some guidelines for such conversations would include:
  - (a) Keep notes of the conversation.
  - (b) Let the child's parents or a Safe Sanctuary committee member know that the conversation(s) are occurring, as well as the reason(s) for the conversation(s).
4. Offering limited counseling and/or Spiritual guidance. (However, if a child's spiritual or emotional needs are significant, consider referring the child to the pastor or professional counselor. Don't overestimate your own counseling abilities).
5. Touching or hugging a child appropriately in a public location when several others are present.
6. Providing restroom assistance following the guidelines below:
  - (a) The door to the diapering facility shall remain open while diapering any child.
  - (b) No child over five (5) years of age shall be assisted in the restroom unless he/she is physically, mentally, or emotionally disabled.

- (c) When the child does not need personal assistance inside the restroom, the Care Provider may escort the child to the restroom, but shall stand outside the restroom. The restroom door may be left open slightly while the child is inside.
- (d) The rules shall be waived if the child has a medical emergency, a potentially embarrassing bathroom emergency, or when there are at least two (2) Care Providers present.

B. Prohibited Conduct

To achieve the goal of preventing any forms of child abuse or the potential of false allegations of child abuse, Care Providers shall **NOT**:

1. Engage in any form of child abuse, including sexual abuse.
2. Hit, kick, slap or shove a child.
3. Sell, give or furnish any child with any tobacco, alcohol, controlled substances or over-the-counter medications.
4. Swear or use obscene, foul, or sexually explicit language in the presence of a child.
5. Remove any clothing of any child, except when appropriately required under necessary circumstances like assisting in the removal of coats, snow suits, etc.
6. Wear inappropriate attire in the presence of a child such as T-shirts that contain wording or gestures that could be construed as obscene, or clothing that does not adequately cover the body.
7. Kiss any child on the lips or in an intimate area.
8. Engage in extended or frequent inappropriate hugging, embracing, or play wrestling with a child.
9. Remain in any building, room, motor vehicle, or private place with a child except as permitted in these policies.
10. Assist any child in the restroom except as permitted in these policies;
11. Deny anyone, who is not a threat to a child, access into a room, vehicle, or other place in which you are present with a child.

### **III. RECRUITMENT AND SELECTION OF CHURCH WORKERS**

#### **A. Procedures**

1. All employees and volunteers require screening.
2. Each employee of the church will be interviewed.
3. Employees and volunteers working with the youth or children on a regular/full-time basis will need to complete a background check and have fingerprint cards on file with the local authorities.
4. References listed on application forms of all employees and volunteers will be contacted. A record of the contacts will be recorded and maintained in the Church office.
5. All employees and volunteers will complete the Application Forms. These forms will remain in effect for five (5) years unless there is a break in service of one (1) year or more. At that time, new application and information forms will be reaccomplished.
6. A volunteer may not supervise youth or children unless there is a five year separation between the volunteer's age and the oldest child or youth they are supervising. A volunteer may be the second adult present with less than a five year age separation. In such a situation, the young adult volunteer must agree to guidance from the Ministry leader or elder volunteer. The Ministry leader or elder volunteer is considered the supervisor. The young adult volunteer's responsibility is to assist with leadership.
7. The Safe Sanctuary Committee will develop and maintain a Safe Sanctuary training program for the church. The Committee will coordinate with the appropriate Ministry Leader to ensure that all volunteers complete an initial and refresher program training every two years thereafter unless significant policy changes have been implemented, covering the specifics of the Safe Sanctuary program. Upon completion of all required training an identification badge will be issued to indicate the person is qualified to work with children/youth of the church.
8. Members and constituents will only be allowed to work with children and youth after they have consistently attended the church for a period of at least six months, unless an exception is approved by the Senior Pastor or Safe Sanctuary Committee and appropriate information forms have been completed.
9. Adults who have been convicted of or have pled guilty to either child sexual or physical abuse may not work as a Care Provider or associate with children or youth. They must covenant with the Church to avoid all contact with children. (See Section VIII, Form 6,

Limited Access Agreement).

10. All church workers must agree to follow this policy.

B. Steps in Recruiting and Selecting Church Child/Youth Care Providers

1. This policy statement will be distributed to all church members and constituents and to all participants in all new-member training.
2. All church Care Providers will be required to fill out the appropriate information forms. Care Providers should contact the Safe Sanctuary Committee or Office Manager to obtain copies of the appropriate forms for completion.
3. Statements in the information forms will be reviewed by the appropriate leaders.
4. References will be contacted by the hiring body and noted on the forms.
5. A check for conviction records will be made by the hiring body for all Care Providers.
6. Care Providers and constituents will protect all children and youth from potential abuse by being willing to attend an annual orientation and/or training session on abuse prevention.
7. All Care Providers will attend and be certified in First Aid and CPR training.
8. The Staff/Pastor Parish Relations committee is responsible for all employees.

NOTE: Since the Safe Sanctuary Program is considered a risk management program. The cost of background checks and driver history checks will be paid from the Trustees Budget. Volunteers are encouraged to help defray the cost of this program by a special donation marked "Safe Sanctuary." Cost for full-time paid staff members will be charged back to their particular program budgets.

## **IV. SUPERVISION OF CHURCH WORKERS**

### **A. Principles**

There are specific procedures for on-site and off-site situations:

1. Specific, parental permission is required for off-site meetings. (See Section VIII, Form 4).
2. Specific, parental permission is required for adults to go out alone with a child or youth.
3. Suspicious behavior will be reported immediately to the Care Provider participating in the activity. (See Section V, Reporting Procedures).
4. The church will provide adequate personnel for all church related activities as outlined in the following procedures:
  - (a) All incidents/accidents involving injury to a child while participating in an on-site or off-site function will be documented and reported. (See Section VIII, Form 5).
  - (b) The church will seek to provide open lines of communication with parents/guardians and an open-door policy allowing parents/guardians access to programs at any time.

### **B. On-Site Procedures**

1. In order to protect the children/youth, Care Providers should not be left alone with a child or youth out of sight of another adult.
2. There should be at least two Care Providers in the classroom or participating in the activity at all times. Ideally, the Care Providers should be unrelated. When it is not possible to have two adults in each classroom, a floating volunteer should be available to assist where needed.
3. All rooms used by children/youth shall have a window or half door, or the door must remain open.



C. Off-Site Procedures

1. At least two unrelated adults shall supervise all groups of children and youth on off-site events except as noted below. Exceptions: When transporting children and youth to events in private cars, there may be one adult in the car; and the driving policy of the church will be followed. This two-adult rule does not apply in parent-child relationships.
2. Parental/guardian permission slips, including a medical release information form, shall be used for all off-site events. (See Section VIII for appropriate form)
3. Youth are not to be requested by the church Care Provider to provide transportation for other youth to any off-site events.

D. Nursery Procedures

St. Andrew's has developed specific guidelines that cover our nursery activities. These procedures are contained in *St. Andrew's Nursery Procedures* and can be obtained by contacting the Office Manager or the Nursery Committee.

## **V. REPORTING PROCEDURES**

### **A. Principles**

1. The church recognizes a legal obligation and will comply with all state and federal laws. A synopsis of Maryland's child abuse laws can be viewed at: <http://www.dhr.state.md.us/cps/abuse.htm>
2. The church recognizes our obligation for mutual accountability.
3. The church also recognizes each person's moral obligations for personal responsibility.
4. The established line of reporting shall be followed in all incidents of suspicious activity, observed abuse and allegations by a victim.
5. The United Methodist Discipline and any Annual Conference policies which pertain to reporting procedures shall be followed.
6. The advice of legal counsel and the insurance company will be obtained.

### **B. Reporting Obligations**

1. Care Providers should be aware of state laws which govern the reporting of child abuse. Such laws shall be discussed as part of the annual Care Provider orientation.
2. The obligation for mutual accountability includes being aware of what types of behavior are inappropriate with children and youth, warning coworkers when questionable behavior is displayed and reporting questionable behavior to the proper individuals.
3. Care Providers will understand that discrete and confidential reporting of suspected abuse is critical to abuse prevention. The reporting reflects caring and is not an act of disloyalty. It is a moral obligation and a personal responsibility, and it takes precedence over any fear of personal or legal recrimination.

C. Line of Reporting

1. Any suspicious activity or observed abuse by a Care Provider, or victim allegations which are brought to the attention of a church Care Provider, must be reported immediately to the appropriate person or persons. These include one or more of the following persons, depending upon the allegations:

- (a) The pastor in charge (unless involved)
- (b) Staff Parish Chairperson (unless involved)
- (c) Safe Sanctuary Committee Chairperson (unless involved)
- (d) The Youth or Nurturing Ministry representatives (unless involved)

NOTE: Anne Arundel County Child Protective/Abuse Services, located at 7500 Ritchie Hwy, Glen Burnie, Maryland 21061, can be contacted at TEL (410) 421-8400 (24 hours) or FAX (410) 508-2041

2. The person making the report of abuse or receiving the report of suspicious activity should then document what, when, where, how and the date, time and circumstances under which the report was made.
3. The person receiving the initial report will report immediately to the pastor in charge, who will be given discretion in determining the validity of the complaint. The pastor in charge will then inform designated church legal counsel, the church insurer, or the state authorities to obtain advice. In cases of clergy sexual misconduct or diaconal sexual misconduct, the policies of the Baltimore-Washington Conference shall be followed.

D. Notes (For persons receiving reports under this policy:

1. Take all allegations seriously. Be gentle and protective of both victim and alleged abuser.
2. Document as stated above. If the state/local authorities are contacted and the report is made anonymously, the report should be made over the telephone in the presence of an attorney or other independent witness (es) who can verify later, if necessary, the identity of the reporter.
3. Persons who are the object of the report will be required to refrain from all child and youth activities until it is determined if further action shall be taken. In any removal of an alleged party from any activities, care should be taken to handle the removal in a discrete manner, recognizing that an investigation is still being conducted.

## **VI. RESPONSE TO ALLEGATIONS OF ABUSE**

### **A. If Abuse is Suspected**

If it is determined that there is reasonable to cause to suspect abuse, then the following steps shall be taken:

1. A Committee will be formed and will be assigned responsibility to take any further actions which are required. The Committee will follow the advice of legal counsel and the bishop/bishop's designated representative (District Superintendent or Guide).
2. The Committee will be made up of the pastor in charge (unless involved), two members of the Church Council, a member of the Safe Sanctuary Committee, and a mental health professional, if available. If the report concerns a hired staff person, a representative of the Staff Parish Relations Committee will also be appointed to the Committee.
3. The Committee will appoint one spokesperson.
4. The spokesperson will present the Committee position statement for the church including the policies and established procedures. This person will be the only person communicating to the press, the congregation and the authorities.

### **B. The Committee may be asked to:**

1. Conduct initial investigations into the allegations.
2. Document all findings and all efforts in the investigation.
3. Notify and cooperate with local and state civil authorities.
4. Notify the parents/guardians.

### **C. The pastor(s) may be asked to offer appropriate counseling.**

#### D. Principles of a Proper Response Plan

A proper response plan includes the following principles to be carried out by the appropriate committees and pastor. The appropriate committees will:

1. Maintain adequate records (employee and volunteer information forms, references, etc.).
2. Prepare a position statement that includes policies and established safeguards.
3. Not engage in denial, minimization, prejudice or blame.
4. Not prejudice the situation, but take the allegations seriously. This includes reaching out to the victim, the victim's family, the accused and the family of the accused.
5. Use the text of the prepared public statement to answer the press and to convey news to the congregation. Care will be taken to safeguard the privacy and confidentiality of all involved.

## **VII. DOCUMENT MAINTENANCE**

### **A. Document Maintenance Policies and Procedures**

1. All forms contained in Section VIII that have been completed by employees and volunteers working for St. Andrew's United Methodist Church shall be reviewed only by the Senior Pastor, Office Manager, the Staff Parish Relations Committee or appropriate Ministry leader.
2. All personnel documentation will be securely filed by the Office Manager in the church office.
3. All information will be treated in a confidential manner. Except in the case of a response to a report of suspicious activity, only appropriate leaders, professional staff, and the Staff Parish Relations Committee shall have access to the information on these documents. In the case of a report of suspicious activity, the person in line of reporting and appropriate legal authorities will have access to the information.
4. After a ten-year period, the records will be destroyed
5. References
  - (a) References for all volunteers will be contacted by the appropriate Ministry leaders before service begins.
  - (b) Each reference will be asked if she/he knows of any reason why the person should not work with children and/or youth.
  - (c) Documentation must be made for each reference call.
6. All children or youth professional staff will be made aware of and required to review the information and sign that they have received, read and understand a copy of this policy.

## VIII. PERSONNEL/PERMISSION FORMS

### Form 1. Application Form

## APPLICATION FOR CARE PROVIDER ST. ANDREW'S UNITED METHODIST CHURCH

### Section 1 Screening Questionnaire

1. Since the age of 21, have you ever been charged with engaging in sexual behavior (sexual intercourse of any kind, intentional touching, or conversation for the purpose of sexual arousal) with persons under 18 years of age?	No	Yes
2. Have you ever been charged with the production, sale or distribution of pornographic materials?	No	Yes
3. Have you ever been charged or adjudicated with sexual misconduct including:		
a. abuse of power or role for sexual purposes	No	Yes
b. sexual contact with a minor or an adult incompetent to give consent	No	Yes
c. sexual assault (e.g. rape)	No	Yes
d. solicitation for sexual purposes (e.g. prostitution)	No	Yes
e. an offense related to pornography or public indecency (e.g. indecent exposure)	No	Yes
4. Have you ever been charged with an offense related to sexual harassment, including unwelcome:		
a. sexual advances	No	Yes
b. requests for sexual favors	No	Yes
c. sexually motivated physical contact	No	Yes
d. verbal or physical domination of a sexual nature	No	Yes
5. Do you have a history of alcohol or drug abuse?	No	Yes
6. Have you ever been charged, arrested, or convicted of any felonies or misdemeanors? (Traffic tickets are civil offenses not covered here)	No	Yes
7. Have you ever been legally charged with DUI or DWI?	No	Yes
8. Has your driver's license ever been revoked or suspended?	No	Yes
9. Have you ever had a restraining order, injunction, order for protection or the like issued against you as a result of allegation of domestic violence, abuse or the like?	No	Yes
10. Have you ever been charged with misappropriating funds or otherwise breaching fiduciary duties in any professional capacity?	No	Yes

**Form 1. Application Form (This portion of the form contains Privacy Act information when filled in and will be protected accordingly)**

**Page Two**

**Section II. Statement of Applicant:** (Please read carefully before signing)

I certify, to the best of my knowledge, that all information given by me in this questionnaire is true and correct. I understand that false or misleading statements made by me or consequential omissions of any kind in this questionnaire provide sufficient cause for my not being further considered or being accepted as an employee or volunteer or for my dismissal when discovered.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Section III. Authorization/Release**

I understand and agree that a background investigation may be conducted with respect to me, and that the information I have provided the St. Andrew's United Methodist Church may be verified by a qualified agency or State Police background check. I agree to release from liability and damages St. Andrew's United Methodist Church and its agent(s). All materials pertaining to the background check shall be the property of St. Andrew's United Methodist Church.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ at (City/State) \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_



**Form 2. Authorization and Release for the Procurement of a Consumer and/or Investigative Consumer Report (This portion of the form contains Privacy Act information when filled in and will be protected accordingly)**

District: \_\_\_\_\_

**AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF A CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORT (PLEASE PRINT OR TYPE)**

I, the undersigned consumer, do hereby authorize **ST. ANDREW'S UNITED METHODIST CHURCH of the BALTIMORE WASHINGTON CONFERENCE OF THE UNITED METHODIST CHURCH, INC.** by and through its independent contractor, KROLL BACKGROUND AMERICA, INC. ("KBA"), to procure a consumer report and/or investigative consumer report on me.

These above-mentioned reports may include, but are not limited to , information as to my character, general reputation, personal characteristics and mode of living, discerned through employment and education verifications; personal references; personal interviews; my personal credit history (if applicable to the position) based on reports from any credit bureau; my driving history, including any traffic citations; a social security number verification; present and/or former addresses; criminal and/or civil history/records; or any other public record.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report of which I am the subject upon my written request to KBA, if such is made within a reasonable time after the date hereof. I also understand that I may receive a written summary of my rights under 15 U.S.C. § 1681 et.seq.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to BALTIMORE WASHINGTON CONFERENCE OF THE UNITED METHODIST CHURCH, INC., KBA by and through KBA, including but not limited to, any and all courts, public agencies, law enforcement agencies and credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received if from other sources.

I hereby release BALTIMORE WASHINGTON CONFERENCE OF THE UNITED METHODIST CHURCH, INC., KBA and any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, by me, my heirs or others making such claim or demand on my behalf, for providing a consumer report and/or investigative consumer report hereby authorized.

I understand that this Authorization/Release form shall remain in effect for as long as I am subject to appointment with said organization. Additionally, I give permission to investigate any incidents of workplace misconduct, including but not limited to; sexual harassment, of which I have been accused for which I am alleged to have been involved during my employment. Further, I certify that the information contained on this Authorization/Release form is true and correct and that my application or employment may be terminated based on any false, omitted, altered or fraudulent information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

First

Middle

Last

**Form 2. Authorization and Release for the Procurement of a Consumer and/or Investigative Consumer Report**

**Page Two**

Other names used (Alias, maiden, nickname, etc.):

Name: \_\_\_\_\_ Date Used: \_\_\_\_\_

Name: \_\_\_\_\_ Date Used: \_\_\_\_\_

Name: \_\_\_\_\_ Date Used: \_\_\_\_\_

Current Address: \_\_\_\_\_  
Street/P.O. Box                      City                      State      Zip Code                      County                      Date Lived

Former Address: \_\_\_\_\_  
Street/P.O. Box                      City                      State      Zip Code                      County                      Date Lived

Social Security Number: \_\_\_\_\_ Daytime Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issuance: \_\_\_\_\_

Date of Birth\*: \_\_\_\_\_ Gender\*: \_\_\_\_\_  
Month                      Date                      Year

- Have you ever been convicted of a crime or convicted in a military court martial?                      Yes\_\_\_ No\_\_\_
- Have you ever been sanctioned or had your license suspended or revoked?                      Yes\_\_\_ No\_\_\_
- Are you currently under any investigation or pending charge?                      Yes\_\_\_ No\_\_\_

**\*This information will enable us to properly identify you in the event we find adverse information during the course of our background search.**

©2001 Kroll Background America, Inc., All Rights Reserved

**Form 3. Volunteer Application**

**Volunteer Application**

***Contact Information***

Name  
Street Address  
City ST ZIP Code  
Home Phone  
Work Phone  
E-Mail Address

***Availability***

During which hours are you available for volunteer assignments?

- |   |   |
|---|---|
| <input type="checkbox"/> Weekday mornings   | <input type="checkbox"/> Weekend mornings   |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings   | <input type="checkbox"/> Weekend evenings   |

***Interest***

In what areas would you be interested in serving?

- |  |  |
|--|--|
| <input type="checkbox"/> Nursery           | <input type="checkbox"/> VIM                               |
| <input type="checkbox"/> Youth Ministry    | <input type="checkbox"/> Church Committee (please specify) |
| <input type="checkbox"/> Thrifty Saturdays | <input type="checkbox"/> Athletics/Coach                   |

***Special Skills or Qualifications***

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

***Previous Volunteer Experience***

Summarize your previous volunteer experience.

**Form 4. Permission Slip**

**Permission Slip for St. Andrews Children's/Youth Event**

**Child's name:** \_\_\_\_\_  
(Last) (First) (M.I.)

**Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip)

**Birthday:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
(Month) (Day) (Year)

**Mother (or Legal Guardian)** \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Home phone) (Work phone) (Cell phone)

**Father (or Legal Guardian)** \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Home phone) (Work phone) (Cell phone)

**In case of emergency contact:**

**Name:** \_\_\_\_\_ **Daytime phone:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_ **Evening phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Daytime phone:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_ **Evening phone:** \_\_\_\_\_

**Allergies (including medications youth can NOT take) / Special Health Concerns:**

\_\_\_\_\_

**Permission/Authorization for Emergency Care**

As the parent or legal guardian of \_\_\_\_\_ (youth's name), I give permission for my child to attend this scheduled activity. In the event of an emergency or accident involving my child, I hereby grant permission to the St Andrew's UM Church authorities to transport my child to a hospital and/or obtain medical treatment if the emergency contact cannot be reached. I also agree not to hold Saint Andrew's United Methodist Church liable for any injury that my child may sustain during participation.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

**Form 5. Accident Report**

**Saint Andrew's United Methodist Church  
Child/Youth Accident Report**

**Name of injured child/youth:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Gender:** Male      Female

**Date of accident:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Where accident occurred:** \_\_\_\_\_

**Activity engaged in:** \_\_\_\_\_

**Description of accident:** \_\_\_\_\_

**Kind of injury:** \_\_\_\_\_

**Description of first aid given:** \_\_\_\_\_

\_\_\_\_\_

**First aid given by:** \_\_\_\_\_

**Personnel present at time of accident** \_\_\_\_\_

\_\_\_\_\_

**Other witnesses present:** \_\_\_\_\_

**How parent/guardian was notified** \_\_\_\_\_

**Reported by:** \_\_\_\_\_

**Form 6. Limited Access Agreement**

**LIMITED ACCESS AGREEMENT**

**(CONFIDENTIAL in nature when completed)**

St. Andrew's UMC affirms the dignity and worth of all persons. We are committed to being a religious community open to those who are in need of worshipping with us, especially in times of serious personal troubles. However, based on your background, we have concerns about your contact with our children and youth in our congregation. The following guidelines are designed to reduce the risk to both you and them of an incident or accusation. We welcome you to our congregation and our membership, but your participation will be limited in ways to ensure the safety of our children and to assure that you will not be subject to future accusations.

Within these guidelines, the congregation welcomes your participation in adult worship services, coffee hour, committee meetings, adult education, all adult social events, and well-supervised intergenerational events. You are to avoid all contact with children on church property or at church sponsored events. This includes the following:

- Please do not talk with children.
- Please do not volunteer or chaperone children's and youth's events, including children's religious education classes, talks with children or youth during worship, youth group, children's and youth's activities during intergenerational events, and driving children and youth to activities.
- Please remain in the presence of an adult who knows your situation at all times when children are present.
- If a child/youth in the congregation approaches you, either at church or in a community place, politely and immediately excuse yourself from the situation.
- Please avoid being in the building unsupervised when activities involving children/youth are in session, such as the day and nursery school, Sunday school, and the nursery room.

I accept that the following people of the Safe Sanctuary Committee, Staff Parish Committee, Sunday School, and MYF will be notified of my circumstances in order for them to protect the children/youth for whom they care.

**Form 6. Limited Access Agreement**

**Page Two**

I have reviewed this covenant and agree to abide by its provisions. I agree that if I violate this agreement, I will be denied access to future church functions and church property.

I understand that this contract will be reviewed every 12 months and will remain for an indefinite period.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Senior Pastor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Safe Sanctuary Representative

\_\_\_\_\_  
Date