



Form B3

Receipt of Child and Youth Protection Policy

I, _____ (name)

_____ (address)

do hereby acknowledge that I have received and read and will abide by the Presbytery of Sheppards and Lapsley's Child Protection Policy and will follow the protocols for responding and reporting possible incidents of abuse.

Event and Date - _____

Signature _____

Date _____

Staff/Volunteer Role _____

Received by the Presbytery on _____ (date)

by _____ (signature)

Title _____