

Alpharetta First United Methodist Church Employee and Volunteer Acknowledgement Form

As an employee and/or volunteer for AFUMC, I acknowledge the following (mark X beside all that apply):

_____ I have received and read the AFUMC Safe Sanctuary Policy

_____ I have completed the Safe Sanctuary Training provided by AFUMC

_____ I have read the re-training information provided by AFUMC

_____ I agree to comply with the guidelines set forth in the AFUMC Safe Sanctuary Policy

Printed Name: _____

Signature: _____

Date: _____

Address: _____

Phone Number: _____

Email: _____