

Diocese of Hamilton Volunteer Acknowledgement Responsibilities Form

Parish	/ Division:		
Name	of Volunteer: (Please print)		
Name	of Ministry(s) or Group(s):		
I herel	by agree that:		
•	At all times while and carrying out my duties as a voluphold Catholic principles and standard of behaviour		l
•	I will not disclose confidential personal, financial or of general operation of the Parish, or about anyone I serverish or Diocesan offices.		
•	I have received, read and understood my volunteer position description and the <i>Volunteer Screening Manual</i> and agree to comply with and be bound by them.		
•	I understand the responsibilities and limits of this position and agree to follow the duties and responsibilities as assigned by the ministry leader or Parish team.		
•	I understand that I am acting as a volunteer of this Parish, and therefore a potential representative only when I am carrying out my duties outlined in my volunteer position description.		
•	I will provide adequate notice to the parish team and ministry leader if I intend to end my service as a volunteer to the Parish.		
•	A Pastor or another authorized representative of the Diocese of Hamilton may terminate my position as a volunteer at their absolute discretion and a reason is not expected, but often some type of explanation will be provided if appropriate.		
Signat	cure of Volunteer	Date	
Signat	cure of Witness	Date	