

All persons under AGE 18 that are interested in volunteering for any church or school activity, event, program or ministry at **SACRED HEART CATHOLIC CHURCH** must complete this form, have it signed by a parent, return it to the church office, AND attend a SAFE ENVIRONMENT TRAINING SESSION before they are eligible to serve.

SACRED HEART CATHOLIC CHURCH

Youth Code of Conduct Agreement

If you do NOT print and/or sign this form legibly, it will be discarded and considered as not having been completed!

Youth's Name (Please Print): _____

Age: ____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

What school do you presently attend? _____ What grade? _____

Note: If you will turn age 18 soon, do NOT complete this form. Go to complete the Screening Packet.

1. I agree to treat other participants, leaders, and staff with respect. I understand that all adult leaders have the authority to discipline me, and I will abide by their decisions.
2. I will always follow the schedule and guidelines given to me.
3. I understand that alcohol, weapons, fireworks, tobacco products of any kind, illegal drugs and profane or abusive language are NOT allowed. (Prescription drugs must be checked and administered by an adult.)
4. I agree to behave in a Christian and positive manner at all times. I further agree to dress appropriately (NO short-shorts, halter/tank tops or torn clothing.)
5. Use of cell phones, digital cameras, i-pods, computers, or any other technology in any way that is offensive or inappropriate (including taking inappropriate photographs, surfing inappropriate websites, displaying and/or sharing inappropriate pictures, videos or music, etc.) is prohibited at all times and in all cases.
6. Sexual indiscretion (including inappropriate touching, language, jokes, etc.) is prohibited at all times and in all cases.
7. No participant is allowed to leave without permission of the coordinator/director.
8. In the event of an emergency or other need to contact any participants, staff must know where I am; therefore I agree to stay on the premises and with at least one other person at all times.
9. I understand that I may be working with children and I agree to take whatever duties I am assigned seriously and responsibly, especially whenever a child's safety is concerned.
10. I understand that if I fail to adhere to any part of this "Code of Conduct" I run the risk of having my parents notified by phone or in person, and I run the risk that I will be sent home if I refuse to follow the guidelines.

I have read, agree with, and will adhere to the "Code of Conduct" described above.

Signature: _____ Date: _____

Please have your parent or guardian complete the consent/release on the reverse side.

PARENTAL CONSENT/RELEASE FORM

TO BE FILLED OUT BY PARENT OR LEGAL GUARDIAN

1. Are you members of **Sacred Heart**? Yes, since _____ No _____

If you are NOT MEMBERS, please provide the following information:

Address: _____

Phone: _____ Email address: _____

2. Emergency Contact Name: _____
Emergency Contact Phone Number(s): _____

3. Has your child (named on page 1) ever been convicted of, pleaded guilty or no contest to, been placed on probation, given community supervision, or given deferred adjudication for a crime or is he/she now under charges for any criminal offense? ___ **Yes** ___ **No**

(A criminal conviction will not necessarily disqualify him/her from consideration.)

The following lines are for any explanations or details that you would like to include for yes answers above.

4. The information contained in this application is true and correct to the best of my knowledge.
5. I hereby authorize my child named on this form to be a volunteer for **Sacred Heart, Rowlett, Texas**. I understand that reasonable precautions will be taken to keep my child safe. I will not hold my parish, members of its staff or its volunteers responsible for accidental harm or injury that may occur during any event. In case of emergency during any event, I hereby consent to and authorize the administering of treatment or medication ordered by a physician or adult for the care of my child. My signature on this form is evidence of my consent.

Parent's printed name: _____
(If your last name is NOT the same as your child's, please note here your child's full name: _____)

Parent's signature: _____

Today's date: _____

Return this form to **Sacred Heart Catholic Church** or Mail to:
3905 Hickox Road Rowlet, TX 75089
Esther Garcia Safety Director

REMEMBER! Your child must also attend a Safe Environment Training Session for Youth before serving as a volunteer.

Print Your Last Name _____ First Name: _____

I understand that if my printing or handwriting on this form is NOT LEGIBLE,
this form will be discarded and considered incomplete.

SACRED HEART CATHOLIC CHURCH
SAFE ENVIRONMENT AWARENESS TRAINING
FOR TEEN AIDES

ACKNOWLEDGEMENT OF TRAINING

I have participated in a training session on the Safe Environment Program of the Diocese of Dallas and **Sacred heart**, specifically designed for Teen Aides.

I understand it is my responsibility to become familiar with and adhere to the guidelines and procedures discussed at the training session and outlined in any other materials on the Safe Environment Program that have been provided to me or will be provided to me, from time to time.

My printed name

My Signature

Date: _____

Presenter: _____

*** Return this form at the end of this session. This form constitutes the only written record that you have attended mandatory training.**

**We sincerely thank all our youth who share their time and talents
as volunteers in the programs and activities of **Sacred Heart**.**

