SAFE SANCTUARY POLICY



Our Mission: "To Expand our ministry in Manitowoc and beyond making new disciples of Jesus Christ for the transformation of the world."

Lakeshore United Methodist Church

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Adopted August 26, 2018 by Lakeshore UMC Leadership Team

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PURPOSE

This policy is prepared pursuant to the directive of the Lakeshore United Methodist Church Administrative Team. Its purpose is to implement a series of guidelines and procedures to be employed by all persons associated with Lakeshore United Methodist Church to reduce the risk of any kind of abuse of children, youth and vulnerable adults within the church congregation. This policy is meant to comply with the recommendations of the controlling resolution of the General Conference of the United Methodist Church adopted in 1966 and re-adopted in 2004, entitled ***Reducing the Risk of Child Sexual Abuse in the Church***.

Developed by the Lakeshore Administrative Team which includes representatives of our Christian Ed. Team, Visitation and Member Care Team, SPRC, Finance Team, UMW, Youth Ministry Team, Media Team and Reverend Carly Kuntz

**Preamble:**

"Whoever welcomes one of these little children in my name welcomes me; and whoever welcomes me does not welcome me but the one who sent me." [Mark 9:37]

"A new command I give you: love one another. As I have love you, so you must love one another. By this all people will know that you are my disciples, if you love one another." [John 13:34]

Jesus also said, "If any of you put a stumbling block before one of these little one . . . it would be better for you if a great millstone were fastened around your neck and you were drowned in the depth of the sea." [Matthew 18:6] Our Christian faith calls us to offer both hospitality and protection to all the vulnerable persons within our doors, i.e., children, youth and vulnerable adults. At Lakeshore UMC we believe in taking a proactive approach regarding this issue following the recommendations of the Social Principles of the United Methodist Church, P 162C. This states "children (youth and vulnerable adults) must be protected from economic, physical, emotional and sexual exploitation and abuse."

The purpose of this Safe Sanctuary Policy is to address the safety of our children, youth (defined as youth/children minors under the age of 18) and vulnerable adults at all Lakeshore United Methodist Church events by preventing opportunities for the occurrence and/or the appearance of abuse of children, youth and vulnerable adults and by protecting workers from false accusations or suspicions.

This policy applies to all persons in the Lakeshore United Methodist Church, including all paid and unpaid leaders, whether lay or clergy. In this policy, Lakeshore United Methodist Church will be referred to as LUMC; minors will include children and youth under the age of 18. This Safe Sanctuary Policy and incident reporting procedures are available to the congregation upon request.

**GENERAL GUIDELINES:**

1. ***Sanctioning:***

All activities involving minors

All activities involving minors and vulnerable adults that utilize the building or grounds of LUMC, or activities that are represented as being a youth or vulnerable adult activity sponsored by LCUM, will require authorization of a staff member, church committee/team, or authorized committee/team member.

2. ***Scheduling:***

To promote accountability and appropriate LUMC oversight, all activities on church property or sponsored by LUMC which involve minors and/or vulnerable adults will be scheduled through the church office and posted on the church calendar located in the church office.

3. ***General Screening Policies:***

a. All paid staff and volunteers working with children, youth or vulnerable adults must complete an application and are subject to a security check that includes a State CCAP and sexual predator check as well as a national check. [Appendix D] The church office will complete the security check prior to a new volunteer entering a position and will update any continuing volunteers on a 5-year basis.

b. By signing the application, the applicant give permission to contact references and perform the necessary investigation to complete the review of the application. If the applicant (paid or unpaid) is found to have been involved in any activity in which the applicant abused or exploited minors or vulnerable adults, the applicant will not be approved. Any conviction of a crime against minors or vulnerable adults shall disqualify any applicant.

4. ***Oversight***

a. LUMC administrative staff will maintain all records in a confidential, secured file. All personnel involved in the process will take every precaution to ensure privacy of all applications and results of checks following HIPAA guidelines. LUMC staff will shred all unnecessary and expired materials.

b. The LUMC web and social media administrator will carefully monitor all posted documents to endure protection of minors or vulnerable adults identity information. A written parental release must remain on file for any pictures and names used in any public publication or website/social media posting.

c. Christian Ed., Youth and Vulnerable Adult Ministry staff will check with the church office in September of each year to ensure that all screening has occurred for all individuals working with minors and vulnerable adults.

d. The SPRC shall oversee screenings on all LUMC employees and volunteers who make regular or occasional visitations to the homebound of all ages.

5. ***Youth/Vulnerable Adult Protection:***

**(Volunteers serving our youth/vulnerable adults must be willing to IMMEDIATELY report to the SPRC, pastor, or state agencies any behaviors that seem abusive or inappropriate or allegations thereof, according to the policies and procedures of LUMC.)**

a. Requirements for Adult Leaders. (Adult hereafter refers to anyone over 18 years

of age.) [Adult Leaders must be 18 years old or older.]

1.) Volunteers serving our minors/vulnerable adults must attend LUMC for at least six months before they will be invited or allowed to provide leadership for an activity involving minors or vulnerable adults.

2.) An age difference of youth volunteers and those participating in LUMC activities must be at least five (5) years unless there are two (2) other adult leaders over the age of twenty-one (21) participating in the event. Siblings in a single activity are an exception to this rule.

3.) Parents/Guardians MUST receive advance notice of all scheduled off- site trips. With activities that take place away from LUMC buildings/grounds and on overnight trips, all adult chaperones must be over the age of twenty-one (21). A ratio of one (1) adult per eight (8) youth for senior high age students and one (1) adult per five (5) youth for junior high/middle school students or younger is recommended. It is recommended that parents or guardians be included on off-site trips.

b. **The Two Adult Principle:** At least two (2) adults over the age of eighteen (18), and from different families, must be present at all activities involving minors/vulnerable adults in the LUMC building or transporting them in their vehicles to or from church activities. Although it is preferred that both adults be in the designated activity room, it is permissible for one adult to circulate between rooms if more than one area of the church is being used, but doors must be left open and/or windows be present in all doors of activity rooms. The second adult MUST NOT be counted if in the building but involved in an unrelated meeting or activity. This principle applies to both onsite and off-site activities.

c. Transportation Guidelines:

When planning activities, arrangements should be made so that no minor or vulnerable adult will ride in a car one-to-one with an adult other than his/her parent/guardian in the course of any LUMC sponsored activity. In an emergency situation in which a second adult is not available, minors or vulnerable adults must be seated in the backseat with one adult driver. There should be a communication system between vehicles established before each trip.

d. Classroom and LUMC Grounds Guidelines:

1.) When it is not possible to have two (2) adults in a classroom, the classroom should have visibility from common areas.

2.) An adult volunteer must remain in the classroom for grades five (5) and below until a parent or guardian arrives. An authorized parent or adult will escort all children up to grade five (5) to and from group activities/classes. The "Two Adult Principle should always be applied when possible.

3.) Adult supervision is required when minors/vulnerable adults are outside on LUMC grounds during scheduled LUMC events.

4.) Vacation Bible School must follow a sign-in and sign-out procedure.

6. ***Permission/Medical Release Forms****:*

All minors participating in LUMC activities must have a current general **Permission/Medical Release Form** [Appendix A] on file and all Vulnerable Adults should have one on file as applicable and appropriate. An authorized adult activity leader will take copies for all off-site activities.

7. ***Substance/Illegal Materials:***

If the possession or use of illegal substances, the abuse of controlled substances, or underage use of alcohol is observed on the grounds of LUMC or at any LUMC sanctioned activities, the adult leader shall notify the staff person or adult minor or vulnerable adult leader in charge of the activity immediately or as soon as possible. The adult who observed or received the report of the event shall complete an **Incident Report Form.** [Appendix B]

8. ***Safety Hazard Awareness:***

All adult LUMC members participating in minor/vulnerable adult activities will be aware of escape routes in case of the need to evacuate the building. They must be aware of the location and use of fire extinguishers. They must be aware of necessary safety precautions in the event of severe weather or tornado occurrences. Escape routes, including windows, must be free from obstruction. In the event of an "active shooter" situation, leaders should attempt to get their charges out of the building and away from danger, but if that is not possible they should remain in their rooms with the door locked and blocked until informed it is safe to leave.

9. ***Training of Adult Leaders:***

a. It is our expectation that all adults who participate in LUMC programming with minors/vulnerable adults will become acquainted with our church policies and the safety information referenced in them on an annual basis. This material is available via hard copy from the church office and on the church website (http://www.lakeshoreumc.com). Adult leaders shall sign an acknowledgement form and return it to the office acknowledging receipt and understanding of this policy at least every five (5) years. [Appendix E]

b. Adults will use language, behavior, and attitudes consistent with our Christian faith and the vision of LUMC. Adult leaders must participate in all required trainings prior to serving in the role of an adult leader of minor/vulnerable adult activities.

10. ***Use of the Web and/or Social Media:***

a. Adults who minister to minors/vulnerable adults are strongly encouraged to set stringent privacy settings on any social networking profile. Group pages, monitored by staff, should be the primary mode of social media interaction. Adults should not submit "friend" requests to minors/vulnerable adults. Such persons may not be able to decline such requests due to the disparity of power between minors/vulnerable adults and their leaders. Minors/vulnerable adults may ask to be "friends," and adults should discern the level of contact they want to maintain with youth prior to responding to these requests. Social media will not be used by church/minor-vulnerable adults leaders to communicate with minors under the age of thirteen (13).

b. If an adult chooses to accept friend requests from minors/vulnerable adults who are associated with their community of faith, other adult leaders must have full access to all aspects of that adult's profile and correspondence.

c. Adults who want to connect with a minor/vulnerable adult to whom they minister via a social networking website are strongly encouraged to set up a closed group account that they may join. Minors/vulnerable adults requesting to "friend" an adult can then be invited to join this group rather than be accepted as a friend on an adult's personal profile account. The purpose of these two separate accounts/profiles is to create a line of privacy and maintain healthy boundaries with youth and real family, friends and colleagues.

d. Any site operated by LUMC that is oriented toward youth between the ages of thirteen (13) and eighteen (18) must require registration for all users and must be password-protected so that only registered users may access the site. Registration for such a site must require the use of a legal name and valid contact information, such as an operational email address. Users of such a site may not post images of minors/vulnerable adults without the prior written consent of a parent or legal guardian for such images to be used.

e. Adult leaders of minors/vulnerable adults groups and former minors members who, due to departure, removal from their position, or are no longer eligible because they "aged out" of a program should be immediately removed from digital communication with youth groups via social networking sites, list servers, etc.

f. Any material on any site (whether affiliated with the church or not) that raises suspicion that a child has been or will be abused/neglected/exploited should be immediately reported to the clergy and/or the Department of children and Families (DCF). If the material is on a church affiliated site, that material should be documented for church records and then remove from the site after consultation with DCF and/or police. The DCF hotline is 1- 800-842-2288.

g. Social networking groups for minors/vulnerable adults should be open to parents/guardians of current members. Parents/guardians should be informed that the content of youth pages or groups that are not sponsored by LUMC are NOT within the purview of adult youth leaders.

h. The posting of any pictures of minors/vulnerable adults on personal websites is forbidden and the media Team chair must ensure a signed photo release is available for any minors/vulnerable adults in a photo prior to posting it on the official church website. [Appendix A] Photos that are published on LUMC sponsored sites should not include name or contact information for minors/vulnerable adults.

**MEETING AND ACTIVITY GUIDELINES:**

1. ***Arrivals/Departures:***

Minors/vulnerable adults being dropped off should arrive only shortly before or at the scheduled program start time(s). Adults bringing minors/vulnerable adults to church activities are responsible for confirming that the activity is occurring as planned.

2. ***Sunday School:***

a. Teachers:

Teachers are expected to be in their classrooms ten(10) minutes before the published start time for class. At least one Shepherd must be present in the front of church to welcome minors and direct them to their classrooms fifteen (15) minutes before the start of Sunday School. Teachers are expected to remain in the classroom with their students until parents come to get them or some mutually agreed upon prior arrangement has been made.

b. Shepherds [hall monitors during Sunday School]

There shall be at least one (1) adult in the classroom section hall during Sunday School hours who will monitor the hallway. They shall escort children ten (10) and under to bathrooms and other areas during class time and bring them back to class. They shall also be responsible for monitoring the doors for strangers who may need assistance to find the sanctuary, etc. Strangers should be escorted out of the classroom areas as soon as possible if they have no reason for being there.

3. ***Participation Expectations:***

While LUMC recognizes that flexibility with regard to minor/vulnerable adult participation in scheduled activities is necessary, it is expected that those attending sponsored activities will participate in some aspect of the planned activity. Minors/vulnerable adults leaving scheduled activities to be in another area and engaged in their own chosen activity is not permitted. If permitted by the teacher, Sunday School Students may go to the Sabbath Cafe for treats which will be brought back to the classroom before the start of class.

4. ***Disruptive Behavior:***

LUMC is committed to providing activities in which the participants, leaders, co- participants from other organizations are property are treated with respect and in a safe manner. Any person minor/vulnerable adult who violates the intent or spirit of this commitment through inappropriate conduct, significant and willful disruption of activities, willful damage to property, verbal or physical assault on another, or offensive disrespect to another will be asked to leave the activity in the custody of his/her parent or guardian. Any adult witnessing or receiving a report of the incident will complete an **Incident/Complaint Report**. [Appendix C]

5. ***Discipline:***

LUMC views corrective action for inappropriate behaviors of minors/vulnerable adults to be within the responsibilities and rights of any adult authorized to provide supervision for any activity sponsored through LUMC. To this end, LUMC endorses the use of verbal correction (without abusive content), removal of offending individuals from the activity, distraction from inappropriate behaviors via engagement in constructive participation, structuring activities to minimize boredom and conflict, and reinforcement of appropriate behaviors via reasonable verbal or other tangible reward to promote appropriate behaviors. Corporal punishment is strictly prohibited.

6. ***Safety and First Aid:***

a. LUMC office staff will post, and update as required, basic first aid procedures and emergency numbers where all personnel can see them. Minimal locations include the kitchen, fellowship hall, nursery, main floor classrooms, narthex and sanctuary. It is the responsibility of all church staff, paid and volunteer, to maintain familiarity with emergency procedures, materials, and supplies.

b. The Trustees will conduct yearly safety inspections of the building and grounds and will promptly correct any safety concerns.

c. Safety is the responsibility of all adults. Any adult should promptly stop an unsafe act.

**MINISTERIAL GUIDELINES:**

1. ***Counseling:***

a. Except in the case of emergency, counseling shall occur between the hours of 8:00 a.m. and 6:00 p.m. If counseling occurs outside the established hours, the counselor will make every effort to have an additional person in the building.

b. Other than pastoral visitation or "crisis counseling," all private counseling meetings shall take place either in a public location or on church premises. Any blinds or door windows will be open.

c. Pastors and trained adult leaders may conduct one-to-one counseling sessions with minors/vulnerable adults at LUMC or at LUMC sponsored activities behind closed doors; it is required that another adult leader is notified of the location. Untrained leaders may listen to the concerns problems of minors/vulnerable adults and will connect them with a trained leader or pastor as soon as possible, with their permission. Any minor/vulnerable adult must be informed that if their safety is in question the appropriate authorities will be notified. The adult leader will make all efforts to minimize the risk that conversations may be overheard.

**It is unethical, inappropriate and unacceptable for any person engaged in the ministry of our church whether lay, ordained, employed or volunteer to engage in sexual behavior with anyone with whom there exists a ministerial relationship.**

2. ***Response to Incidents of Abuse:***

a. The SPRC, activity leader or staff member will take seriously all suspected abuse, allegations or reports of abuse and will not prejudge the situation. The person aware of or receiving a complaint shall immediately notify the Pastor and the SPRC Chair who will handle complaints or concerns of violation of policy. Clergy or SPRC designee must complete tasks as listed in the "Critical Incident Checklist." [Appendix B]

b. As far as possible, the investigator will maintain confidentiality of all persons involved in the report of misconduct. In order to investigate and decide an appropriate response those involved in the investigation may share needed information.

c. All persons involved in an allegation will receive compassion, sensitivity and concern.

d. Allegations considered valid will result in suspension from the leadership role until cleared of any wrongdoing.

**Appendix A to Safe Sanctuary Policy**

**Lakeshore United Methodist Church**

**Sunday School/All Activities of Minors/Vulnerable Adults**

**Parental/Guardian Medical Release Form**

Participant(s) Child #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate:\_\_\_\_\_\_\_\_\_Grade:\_\_\_\_\_

Child #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate:\_\_\_\_\_\_\_\_\_ Grade:\_\_\_\_\_

Child #3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate:\_\_\_\_\_\_\_\_\_ Grade:\_\_\_\_\_

Parent or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home e-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone numbers: (Cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Lakeshore United Methodist Church School Year 2018-2019**

this form is to insure informed parent consent for activity(s) sponsored by Lakeshore United Methodist Church (LUMC). It also provides consent for treatment of minors who become ill or injured in the course of the activity(s) if a parent or guardian cannot be reached to give consent. We will make every effort to contact the parent(s)/guardian(s) named below:

**Additional Emergency Contacts:** (In an emergency, every reasonable effort will be made to reach parent(s)/guardian(s) of the participants.

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

Relationship to Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent/guardian

**Who, besides parent/guardian, is authorized to pick up your child(ren)/vulnerable adult(s) from any church activities?**

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

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**General Health Information**

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| --- | --- | --- | --- | --- |
| Health  Information | Child #1 | Child #2 | Child #3 | Child #4 |
| Name |  |  |  |  |
| Concerns we should be aware of: e.g. medications, dietary needs,  Special help - e.g. bathroom help; trigger points, etc. |  |  |  |  |

\*\*\* Additional Health or behavioral questions:

1. My Child/Vulnerable Adult is uncomfortable with or has aversions to (ex. loud noises, dark rooms etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. A trigger point that could produce a meltdown for my child/vulnerable adult is:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. If my child experiences a meltdown, he/she calms when: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Special equipment/items that can help soothe (ex. special toy, blanket, pacifier, etc.) my child/vulnerable adult:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Photograph/Video Release**

I authorize staff members of Lakeshore United Methodist Church (LUMC) to use photos, videos, and/or other likenesses of myself and/or my child, the child for whom I have legal guardianship, my vulnerable adult for promotional materials regarding LUMC programs, facilities, or services including live streaming. such images will not be sold to other parties. Promotional materials bearing these images may be distributed for free to the public and posted on the LUMC website at http://wwwlakeshoreumc.com.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian Date

**This page must be completed for middle school and high school youth ONLY.**

Appendix A Lakeshore UMC Safe Sanctuary Policy - Part 2

Lakeshore United Methodist Church

Youth Program Participant Behavior Covenant

(To be signed by both youth and adult participants.)

As representatives of Christ and the Church, we, the participants in the Lakeshore United Methodist (LUM) Youth Program, take seriously our responsibility to care for one another. This covenant represents our affirmation of our concern for the wellbeing of the total community. We covenant with each other to insure the safety of all, to make our time together most meaningful, and to care for the facility which we share. In addition to our general concern for our community, we agree specifically to:

A. Leave vehicles parked, locked and unoccupied.

B. Remain on the program site unless having been given permission to leave.

C. Attend all activities including meals.

D. On overnight activities, observe scheduled curfew by being in rooms, quiet, and not disruptive to others. Never enter the room of someone of the other gender.

E. Not use tobacco products.

F. Not bring animals, weapons, illegal substances, explosives, fireworks, alcohol or dangerous materials.

G. Respect the person, equipment and property of others. (This should be considered when considering practical jokes, water fights use of shaving cream, etc. Do no harm to others.)

H. Use language, behavior and attitudes which are consistent with our Christian faith.

I. Agree to participate in every program session and small group meeting.

This covenant is made between each person and the whole group. I agree to follow all of the above because I desire to represent Jesus in a positive manner at all times.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Participant Signature Parent/Guardian Signature Date

**Permission to Participate in Activity and to Transport Youth with One Adult Vehicle.**

I, the undersigned parent or guardian, do hereby give my permission for my child(ren) to participate in LUM Youth Ministry activities throughout the year. I also do give my permission for my child(ren) to be transported to and/or from LUM Youth Ministry activities by LUM Youth Ministry-designated leadership and employees with only one adult in the vehicle if necessary. I understand that my child(ren) and I will need to sign in at the beginning of each activity and make sure our information on file is current.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian Date

**Communication by Social Media, Email, and Texting:**

\_\_\_\_\_ I authorize staff members of LUM Youth Ministry to communicate **by email and/or texting** with my child or the child for whom I have legal guardianship.

\_\_\_\_\_ I authorize staff members to communicate **using Google Groups or Facebook** with my child or the child for whom I have legal guardianship.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian Date

**Appendix B to Lakeshore United Methodist Church Safe Sanctuary Policy**

**Critical Incident Report**

**Definitions of Abuse:**

*Lakeshore United Methodist Church (LUMC) will actively work to prevent* ***Physical Abuse*** *("in which a person deliberately and intentionally causes bodily harm to another"),* ***Emotional Abuse*** *("in which a person exposes a child to spoken and/or unspoken violence or emotional cruelty"),* ***Neglect*** *("in which a person endangers a child's health, safety, or welfare through negligence"),* ***Sexual Abuse*** *("in which sexual contact between a child land an adult or another older and more powerful youth occurs"), and* ***Ritual Abuse****("in which physical, sexual, or psychological violations of a child are inflicted regularly, intentionally, and in a stylized way by a person or persons responsible for the child's welfare). All situations apply equally to vulnerable adults.*

The leader shall follow these steps for reach instance of suspected or reported abuse.

**Dealing With The Victim:**

1. Assess the needs for emergency care for the victim, and immediately notify the parents and/or other legally responsible adult. The care and safety of the victim is the first priority.

2. As needed, provide emergency healthcare, including:

a. First Aid

b. Emergency Services

c. Hospital emergency room

When deemed appropriate, arrange for crisis counseling and/or long-range counseling in consultation with the pastor.

3. Secure and maintain the integrity of the area and protect all evidence for the professional investigation.

4. Offer and provide pastoral resources as needed. Show care and support to prevent further hurt.

5. Notify legal authorities as required and fully cooperate with the civil authorities under the guidance of the church attorney.

6. Inform the Pastor or designated representative of all details of the incident. the Pastor or designated representative will release any required information to the media. Under no circumstances should you, as leader, communicate with representative of the media.

7. As appropriate, immediately contact the pertinent church officer(s), staff or church bodies.

8. Document all your efforts at handling the incident, but do not attempt an in-depth investigation. this should be left to professionals who are familiar with this type of case. This is to protect the rights and privacy of the victim and the accused. Maintain all files with all documented actions, interview notes, recorded conversations, etc. in a locked and secure area to insure privacy and confidentiality.

**Dealing With The Accused:**

First, secure the safety of the child, youth or vulnerable adult member. Remove the accused from any further contact with the alleged victim. Treat the accused with dignity and support. Offer to provide pastoral care to the family of the accused, as appropriate. Refer the accused to clergy outside of LUMC if deemed more desirable, or if the accuser's family requests it.

**Reporting Incidents:**

All Staff regulated by Wisconsin State Law regarding reporting of Child Abuse will comply with all applicable statutes.

1. When a leader of a LUMC program, event or activity suspects that abuse or any potential violation of our Safe Sanctuary Policy is taking or has taken place, the leader shall contact the pastor, SPRC Chair AND event leader immediately and cooperate fully with any investigation conducted thereafter. If the report is not in the form of an incident report, the leader will complete one.

2. Following the report of an incident, the event leader, or supervisor in charge shall carefully document the incident or complaint using the incident/Complaint Form found at Appendix C.

3. If immediate safety concerns exist, he or she may call 911 to report the concern.

4. The leader will address any needs the child or youth may have, medical or otherwise and report the incident to the parent(s) and/or legal guardian(s).

5. The person receiving the complaint shall respectfully remove the suspected individual from the surroundings until an appropriate investigation is completed. the matter shall remain confidential.

6.If the incident is not clearly a criminal act, the pastor will determine if additional information and statements are required, and if so will assign an SPRC member to participate in a meeting with all parties (parents/guardians if the accused is a minor or vulnerable adult) as soon as possible to report the incident and begin moving toward resolution.

7. The reporting parties will be kept informed of progress on the process.

8. The leader, if he or she deems it appropriate may then speak with the alleged victim, being careful to use open-ended questions and document all such conversations. Careful and confidential documentation is essential using page 2 of Appendix C.

a. If appropriate, you may obtain a written statement from or assist in preparing a statement made by the alleged victim.

**Appendix C to Lakeshore United Methodist Church Safe Sanctuary Policy**

**Incident/Complaint Report Form**

***When complete, turn this incident/Complaint form in to the Pastor or SPRC Chair. If grievance is against the Pastor, turn this in to the District Superintendent.(***Please print all information clearly.)

Date of Incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Incident: \_\_\_\_\_\_\_\_

Specific Location of Incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Minor/Vulnerable Adult Involved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age of Minor/Vulnerable Adult Involved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Minor/Vulnerable Adult: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of incident (include location, names of all involved, any evidence of injuries, how resolved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person completing report:

Name:(print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:(signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Record any action taken with the victim or others involved in the incident (include date and time of any other contacts made regarding this incident:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Page 1 of 2

Complete an Incident/Complaint Form anytime an adult observes or receives a report of inappropriate conduct:

\* Possession or use of illegal substances, the abuse of controlled substances, or underage use of alcohol on the grounds of LUMC or at an LUMC sponsored or sanctioned activity.

\* Significant and willful disruption of activities, willful damage to property, verbal or physical assault, or offensive disrespect to another.

\* If unsure if this form should be completed, check with the Pastor.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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**Appendix D for Lakeshore United Methodist Church Safe Sanctuary Policy**

**Volunteer Application & Background Check**

The information contained in this form is for the internal use of Lakeshore United Methodist Church **only**.

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other names that have been used by this applicant (if any):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City & State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone: \_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Position applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation, current employer, and business address.

Time at this employment: \_\_\_\_\_\_\_ Years \_\_\_\_\_\_\_\_months

List (name and address) of the churches you have attended in the past five (5) years:

Name/address/telephone number of pastor, employer and personal references who may be contacted:

Pastor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Personal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe your background working with the program and/or age group requested. (Include information about church related volunteer, and paid experience you may have.

Groups you are currently active in:

Have you ever been convicted of any criminal offense? Yes No

Have you ever been charged with or convicted of child neglect or abuse? Yes No

Have any complaints or allegations of misconduct involving children ever been made against you? Yes No

Have you ever been charged with, convicted of, or pled guilty to a crime or felony involving sexual misconduct? Yes No

Have you ever been convicted of the possession, use, or sale of drugs? Yes No

Within the past thirty (30) days, have you abused alcohol, legal or illegal drugs? Yes No

Have you been convicted of or plead guilty to a moving violation within the last

five (5) years? Yes No

**Please explain fully and YES answers to the above questions using additional paper if necessary space is required.**

In addition to the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of young people or vulnerable adults? Yes No If yes, explain.

I give my permission for a duly authorized representative of Lakeshore United Methodist Church (LUMC) to request the Wisconsin Department of Law Enforcement to release information regarding any record of charges or convictions contained in its files. I understand this includes federal, state and local files. It may include any and all crimes against minors. I will not hold the Wisconsin Division of Law Enforcement or LUMC liable for any results that may result from the response made to this request. I waive any right that I may have to inspect the references provided on my behalf.

I certify that the information I have provided is true and correct. If it is found that the answers given are untrue, I understand that it may be cause for dismissal.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant's Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature (for applicants under age 18) Date

Information from the background check will be returned to the LUMC. Information will be shared with the Staff Parish Relations Committee (SPRC) only when it is appropriate. All information gathered on this application and through the background check will be kept completely confidential.

Thank you for your care and consideration of our congregation, our children, our youth, our vulnerable adults. We are grateful for your cooperation.

**Appendix E to Lakeshore United Methodist Church Safe Sanctuary Policy**

**Lakeshore UMC Nursery Care**

**Parental/Guardian Release Form**

(if applicable)

Participants:

Child #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate: \_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_

Child #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate: \_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_

Child #3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate: \_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_

Child #4: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate: \_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home e-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work e-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: (Cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To reach you during worship.

**Additional Emergency Contacts:** (In an emergency, every reasonable effort will be made to reach parents/guardians of minor participants.

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

Relationship to Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Phone: \_\_\_\_\_\_\_\_\_\_\_ Evening Phone: \_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.**Who, besides parent is authorized to pick up your child(ren) from the nursery?**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Is there anyone who should not be allowed to pick up your child(ren) from the nursery?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Health Information | Child #1 | Child #2 | Child #3 | Child l#4 |
| Name |  |  |  |  |
| Allergies/health concerns/needs: (\*\*\*see add. info. below) |  |  |  |  |
| Special dietary needs |  |  |  |  |
| Medical history that should be noted |  |  |  |  |
| Changes medical: (note date) |  |  |  |  |

\*\*\*Additional health or behavioral questions

1. My child's behavior may indicate a medical problem requiring immediate attention. Please describe symptoms, behaviors, and actions that should be taken.

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. My child will require additional assistance with (ex. Restroom use):

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. My child is uncomfortable with or has aversions to (ex. loud noises, dark rooms):

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. A trigger point that could produce a meltdown for y child is:

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. If my child experiences a meltdown, he/she calms when:

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Special equipment/items that can help sooth (ex. special toy, blanket, pacifier):

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Photograph/Video Release**

I authorize staff members of Lakeshore United Methodist Church (LUMC) to use photos, video, and/or other likenesses of myself and/or my child or the child for whom I have legal guardianship for promotional materials regarding LUMC programs, facilities, or services including live streaming. Such images will not be sold to other parties. Promotional materials bearing these images may be distributed for free to the public and posted on the LUMC website at lakeshoreume@lakeshore.com.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian Date

**Appendix F to Lakeshore United Methodist Church Safe Sanctuary Policy**

**Lakeshore United Methodist Church**

**Acknowledgement of receipt of Safe Sanctuary Policy**

By my signature below I acknowledge that I have received and read a copy of the Lake Shore United Methodist Church Safe Sanctuary Policy. I will abide by the rules and policies of this document.

PRINT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_