Limited Access Agreement in Cases of Allegation
(Adopted unanimously by the Pullen Safe Congregation Committee

A serious complaint or allegation about you, now under review, has been relayed to the Safe Congregation Committee. In order to assure the protection of the children, youth and other persons who may be specified in this agreement from risk while this complaint is being investigated, and in order to protect you from further suspicion, we ask you to abide by this interim agreement.

Signing this document in no way constitutes a presumption or confession of guilt. This is a routine safety precaution, activated without prejudice toward particular individuals or circumstances. This document will be made known only to the Pastors, appropriate staff, the members of the Safe Congregation Committee and other persons that may be deemed appropriate. It will be kept in a locked file in the church office.

By signing this agreement you agree to the following limitations on your conduct and physical location until such time as the agreement is terminated:

You must avoid all contact, including verbal, with all children, youth and other persons who may be specified in this agreement while on church property or at congregation-sponsored events.

You must not volunteer or agree to lead, chaperone or participate in events for children, youth and other persons who may be specified in this agreement while on church property or at congregation-sponsored events.

You must remain in the presence of an adult who has been advised of your situation at all times when children, youth and other persons who may be specified are present.

If a child, youth or other person who may be specified in the church approaches you, either at church or in a community place, you must politely and immediately excuse yourself from the situation.

You must avoid being in the building unsupervised when activities involving children, youth or other persons who may be specified are in session, such as nursery school or youth group.

You must not possess or attempt to possess a key to the Pullen facility.
You accept that the following people will be told of your circumstances in order for them to assist in the protection of the children, youth and other persons who may be specified for whom they care:

_____________________________________________________________

_____________________________________________________________

_____________________________________________________________

In addition to all children and youth, you must avoid the following persons:

_____________________________________________________________

_____________________________________________________________

You must limit your attendance at Pullen to the following activities for which the box below has been checked and avoid all other activities:

- Worship services - Support person(s)* required? No (  ) Yes (  )
- Social gatherings in the church - Support person(s)* required? No (  ) Yes (  )
- Adult meetings with minors present at the facility, such as choir - Support person(s)* required? No (  ) Yes (  )
- Adult meetings without minors present at the facility - Support person(s)* required? No (  ) Yes (  )
- Intergenerational church activities - Support person(s)* required? No (  ) Yes (  )
- Intergenerational group outings such as ice skating, baseball games, etc - Support person(s)* required? No (  ) Yes (  )
- Alone in building with minister or other staff - Support person(s)* required? No (  ) Yes (  )
- Social activities in other member’s homes with minors present - Support person(s)* required? No (  ) Yes (  )

Other:

_____________________________________________________________: Support person(s)* required? No (  ) Yes (  )

_____________________________________________________________: Support person(s)* required? No (  ) Yes (  )

_____________________________________________________________: Support person(s)* required? No (  ) Yes (  )

*Your support person/persons is an individual (or group of individuals) who knows about your history/situation and has been approved by the Pastors to accompany
you to activities where children and youth or other specified persons may be present.
I have reviewed this covenant and agree to abide by its provisions. I understand and agree that if I violate this agreement, I will be denied access to all church functions and church property.
I understand that this contract will be reviewed regularly and will remain in effect until such time as it is terminated by the Pastors and Safe Congregations Committee.

_________________________________  ____________
Signature                         Date

_________________________________  ____________
Pastor                              Date

_________________________________  ____________
Safe Congregation Committee Chair     Date