CATHOLIC MUTUAL GROUP

KEY POLICY INFORMATION FORM

Name of person requesting key: (Please Print)	Name of Parish	
Home Address		Telephone Number
Building description:	Reason for use:	

By my signature below, I undertake to use the key responsibly.

- ***** If I open the relevant building, I shall be completely responsible for locking it.
- **♦** I shall not give the key to anyone else.
- ***** I shall not have copies of the key made for myself or anyone else.
- ✤ If I cease to fulfill the function stated above, I shall return the key to the Pastor or Administrator immediately.
- ✤ I shall inform the Pastor or Administrator of any change of information immediately.
- ***** I shall return the key to the Pastor or Administrator upon demand.
- ***** If I lose the key, I shall inform the Pastor or Administrator immediately.

Except for explicit privilege by the Pastor or Administrator, I confirm that I am a registered member of:

Signature

Date

Pastor / Administrator / Associate

Date

KeyPolicy.docx