Covenant Letter for Registered Sex Offender

Dear \_\_\_\_\_\_\_:

It has come to our attention that you are listed on the Sex Offender Registry for Virginia. As a church family, we affirm every person’s need to be part of a faith community such as ours, but we hold in balance the imperative to all we can to keep all our parishioners safe in body and spirit.

Under these circumstances, your participation in the life of the \_\_\_\_\_\_\_\_\_ United Methodist Church, or your presence on church premises, requires that a written and binding covenant be made – between you and the church – to adhere to the guidelines outlined below. By making this covenant and remaining faithful to it, without exception, we are hopeful that the pastor, the staff, and the congregation can be of assistance to you, and that the church will, in turn, benefit from your presence and participation in the church’s ministry. Each of us is in need of the mercy and grace God offers. The terms of the covenant are as follows:

1. Any time you are on the campus of the church, you must be accompanied by a “Designated Attendant.” There will be at least two persons who will be available to act as Designated Attendants for you. The name and telephone number of the agreed Designated Attendant is listed at the bottom of this letter. You should make contact with them prior to coming to the campus on each occasion. A Designated Attendant must be present to meet you at the corner of \_\_\_\_\_ and \_\_\_\_\_ Street and be in your company at all times while you are on the campus of \_\_\_\_\_\_ church. This includes accompanying you to the restroom. A Designated Attendant will accompany you to your car at the time you leave the campus.

2. You may not enter Children’s Building for any reason.

3. You cannot serve in any positions of leadership or teaching.

4. You agree to allow the pastor (or designee) to contact any law enforcement, probation officer or other governmental official – but not your attorney or any health care provider – in order to request or obtain information that the pastor believes may be of assistance in ministering to you or to the congregation or others in the church community. By signing this letter, you agree that the law enforcement, probation officer or other governmental official may share any information with the pastor or his designee, and you release that person and their organization or employer from any liability as a result of releasing this information. This authorization, and release specifically includes, without limitation, any information, written or verbal, the law enforcement, probation officer or other governmental official has obtained concerning medical, psychological and psychiatric conditions or treatment.

5. You agree to meet and consult with the pastor upon request for the purpose of providing assistance to you or for the protection and security of the congregation or others in the church community.

6. You understand and agree that the pastor and SPRC must keep other church staff and members apprised of your status and the guidelines agreed upon. We trust you understand the reasons for these requirements. If so, and if you are committed to keeping this covenant, please sign and date this letter in the space provided below. If you cannot or are unwilling to do so, we regret that we cannot allow you to visit church premises again for any reason.

A review of this covenant shall occur in the event of any change in Pastor, SPRC Chair, Family Ministries Director or Designated Attendants.

Please know that we are praying for you and for ourselves as we locate and follow an appropriate path for moving forward in faith. We look forward to what God will do in your life and in the lives of all members of this congregation and those who seek to participate in its ministries.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Pastor

The Designated Attendants to be called any time you plan to come to the campus of the church are:

1. ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel no. \_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel no. \_\_\_\_\_\_\_\_\_\_

I have read the above letter and agree to abide by the mandatory guidelines contained in the letter.

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

Witness:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_