

VISITOR NON-DISCLOSURE AGREEMENT

I understand that for safety and legal reasons, all information about anyone who seeks or has received the services of must be kept confidential. This includes any products or services that could be considered proprietary information.

This also includes the identity of those who seek services, their names, gender, age, number of children, addresses, types of services received, and place where the services were requested or received, and any other information that could identify the individual. I understand that this information is NOT to be shared with anyone including any private or public institutions.

I will maintain the confidentiality of those people I meet at _____, ("establishment") including the identities or personal details of any staff, volunteers, or patrons.

Also, because of significant security issues, I understand that the establishment's location must be kept confidential.

I understand that my confidentiality obligation is on-going and it does not end when upon termination of my relationship with this establishment.

I agree to abide by the guidelines above. I understand that failure to respect these confidentiality guidelines may result in me being barred from the establishment along with legal action if needed. Depending upon the impact of my confidentiality breach, I may also be subject to civil or criminal liability. This Agreement was created to ensure the safety and privacy of service patrons, staff, and volunteers. I agree to notify an administrator immediately if I have questions or concerns regarding this Agreement.

Visitor Signature _____

Visitor Printed Name _____ Date: _____