

Acknowledgement of Receipt

On _____, I was given a copy of the Diocese of Peoria's *Harassment Policy*. I have read the *Harassment Policy*, understand its meaning and agree to conduct myself in accordance with its terms. I also agree to be governed by the provisions of the *Harassment Policy* and acknowledge the rights and obligations of the Bishop of the Diocese of Peoria.

I acknowledge that the *Harassment Policy* is not intended to create any contractual obligations, express or implied, on the part of the Diocese of Peoria.

Signature

Name

Parish/Institution/Agency/Department

**Return to: Office of the Vicar General
Diocese of Peoria
419 NE Madison Avenue
Peoria, IL 61603
FAX: (309) 671-1576**