

	FORM 4
	CITY OF CLARENCE-ROCKLAND ACKNOWLEDGEMENT MEMBERS OF COUNCIL/COMMITTEE AND VOLUNTEER CODE OF CONDUCT

I, _____ (*full name*)

Being a : (choose one)

- ☐ Member of council of the City of Clarence-Rockland
- ☐ Member of a committee of the City of Clarence-Rockland
- ☐ Volunteer of the City of Clarence-Rockland

Acknowledge the receipt of a copy of the: (choose one)

- ☐ Council Code of Conduct of the City of Clarence-Rockland
- ☐ Committee and Volunteer Code of Conduct of the City of Clarence-Rockland

I agree to be bound by the terms of the identified Code of Conduct.

Signature of person making the acknowledgement

Date (dd/mm/yyyy)

FOR OFFICE USE ONLY	
<p>_____ Date received (dd/mm/yyyy)</p>	<p>_____ Signature of the Clerk or designate</p>