

**Williamson County Crisis Center**

**Shelter Confidentiality Statement**

I, \_\_\_\_\_, will not give out the location of the Williamson County Battered Women's Shelter or any information about who resides there.

Revealing the location of the shelter or the identity of the residents could jeopardize the safety of the shelter residents and the Williamson County Crisis Center's employees.

I understand the need for keeping the location secret and not revealing the identities of the residents and will not reveal this information to anyone.

The safety and well being of the residents as well as the integrity of the Crisis Center depends heavily on the staff and volunteers' respect for the privacy of our residents.

I have read this statement and understand I can be relieved immediately of my responsibility at the Crisis Center if I fail to comply with the Center's policies and procedures pertaining to confidentiality. My signature below indicates I understand, agree to, and will comply with the Center's confidentiality policies and procedures.

Volunteer

Date

Williamson County Crisis Center Staff

Date