

New Families Only

Child's Name _____

First Presbyterian Church
200 West Trade Street
Charlotte, North Carolina 28202

Office Use Only

Name _____
Card # _____
Date Issued _____
Date Entered _____
Entered By _____

SECURITY ACCESS APPLICATION AND AGREEMENT

		CDC Poplar Street	Courtyard/Reception Entrance - Trade Street	Administration Bldg. - Trade Street	WDS 5 th Street	Loaves and Fishes Poplar Street
<input type="checkbox"/>	Ministers and Senior Staff	24 hours	24 hours	24 hours	24 hours	24 hours
<input type="checkbox"/>	Church Staff	Monday-Friday 7:30am-5:30pm	Monday-Friday 7:30am-5:30pm	Monday-Friday 7:30am-5:30pm		
<input type="checkbox"/>	CDC Staff	Monday-Friday 7:00am-6:00pm	Monday-Friday 7:00am-6:00pm	Monday-Friday 7:00am-6:00pm		
<input type="checkbox"/>	CDC Parents (Fobs only)	Monday-Friday 7:30am-5:35pm				
<input type="checkbox"/>	WDS Staff	Monday-Friday 7:30am-4:00pm	Monday-Friday 7:30am-4:00pm	Monday-Friday 7:30am-4:00pm	Monday-Friday 7:30am-4:00pm	
<input checked="" type="checkbox"/>	WDS Parents (Fobs only)		Monday-Friday 9:00am-1:30pm	Monday-Friday 9:00am-1:30pm	Monday-Friday 9:00am-1:30pm	
<input type="checkbox"/>	Choirs (Fobs only)	Sundays 7:00am-1:00pm Thursdays 5:45pm-10:00pm	Sundays 7:00am-1:00pm Thursdays 5:45pm-10:00pm			
<input type="checkbox"/>	Other					

Access is not valid on scheduled days when the church/schools are closed.

The Security Access Device issued to you will provide you with access to the parking lot gate, Church/School doors (that you have access to), time clock (if applicable), and burglar system (if applicable). This is a universal device for this campus and **MUST** be safeguarded for your own protection but also for the security of the children we have on campus each and every day and night.

To ensure a safe campus, all staff are **REQUIRED** to have this device with them at **ALL** times. It will be needed to access the building. If your device is lost, stolen, or misplaced, you **MUST** request a replacement (\$20.00 replacement fee).

I agree to notify the First Presbyterian Church Business Manager or designee immediately if my access device is lost, stolen or misplaced. I accept full responsibility for keeping the device secure at all times. Replacement devices cost \$20.00 adjusted as needed to recover the cost associated with replacement. Access devices must be returned within 24 hours of (1) a request made by First Presbyterian Church to return the device, (2) if I resign my position or (3) if my employment is terminated. (4) if my child/ren leave school. Refunds are not given for the return of any replacement device.

I further agree not to let anyone enter the building with me unless I personally know them by name and association with the church. If I do not know them, I will ask them to go to the Courtyard entrance for assistance and direction from the receptionist.

_____Initials required here: I realize that if I do not follow these requirements exactly that I am putting the children, staff, members and visitors to First Presbyterian Church at risk of allowing an unauthorized person to enter the building, possibly finding an access device and using it for unauthorized access to the facilities and potentially inflicting personal injury or physical destruction to this historic facility. Failure to abide by these requirements will usually result in my forfeiting this privilege.

By signing below, I agree to the above conditions including immediate notification if my device is lost, stolen or misplaced. I further agree that I will not give my device to anyone else to use, including other employees, church members, friends or family members.

Date: _____ Printed Name: _____

Signature: _____

More Required Information On Back

First Presbyterian Church
200 West Trade Street
Charlotte, North Carolina 28202

SECURITY ACCESS APPLICATION AND AGREEMENT

Name: _____

Address: _____

Home Phone: _____

Mobile/Alternate Phone: _____

Email Address: _____