## Statement of Confidentiality-Staff

I understand that in the course of carrying out my duties as a employee of the Town of Craik, I will on occasion be dealing with confidential information. Except as may be legally required, I will not disclose or release such information to any person at any time. Signature Date Print Name **Statement of Confidentiality-**Volunteer I understand that in the course of carrying out my duties as a volunteer for the Town of Craik, I will on occasion be dealing with confidential information. Except as may be legally required, I will not disclose or release such information to any person at any time. Signature Date Print Name

## **Statement of Confidentiality -**Councilor

of Craik, I will on occasion be dealing with confidential information. Except as may be legally required, I will not disclose or release such information to any person at any time.	
Signature	Date
Print Name	