

**ST. PETER AFRICAN METHODIST EPISCOPAL CHURCH**  
**4730 Margaretta Ave. Saint Louis, MO 63115**

**PASTORAL CONFERENCE DISCLOSURE FORM**

I, \_\_\_\_\_ (the counselee), have entered into conference/counseling sessions at St. Peter African Methodist Episcopal Church. For my benefit, the following is a list of general guidelines, which the Church has established to be followed during conference/counseling session(s).

1. No after-hours conference/counseling. Conference/Counseling shall occur between the hours of 8:00 a.m. and 6:00 p.m., unless there are two people in addition to the counselee present.
2. All counseling or meetings between the counselee and counselor shall take place on church premises.
3. All conference/counseling sessions shall be held in a professional manner and atmosphere including:
  - Under no circumstances should there be any physical contact between the counselee and counselor;
  - The counselor and counselee must remain attired at all times; and
  - The counselor and counselee must avoid the establishment of any intimate personal relationship.

1. I also understand that any information disclosed by me regarding the abuse of a child and/or abuse of any kind in any form may **not** be confidential.

I agree that if any of the above provisions are violated, or if any other situation should arise which makes me feel uncomfortable, I will report immediately and directly to:

1. The Pastor and/or any officer of Saint Peter A.M.E. Church, and/or
2. The Presiding Elder of the St. Louis –Cape Girardeau District of the A.M.E. Church, and/or
3. The St. Louis Police/Sheriff Department.

THE UNDERSIGNED HAS READ THE FOREGOING AND FULLY UNDERSTANDS IT.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)