VOLUNTEER PRIVACY AND CONFIDENTIALITY POLICY

("Volunteer") acknowledges that, during the
course of his/her volunteering with the 719Lacrosse, Incorporated (719LAX)
he/she will be exposed to information pertaining to the personnel, participants,
business, financial, and/or technical aspects of 719LAX business and operations
("Information") and will receive materials containing the Information. Most of the
Information and the materials containing it are proprietary, and much of the
Information and materials are confidential information concerning the 719LAX's
business. Volunteer also acknowledges that much of the Information regarding
participants in 719LAX programs and the 719LAX staff may be subject to strict state
and federal statutes regarding privacy and confidentiality. Therefore, Volunteer
agrees that as a condition of volunteering with the 719LAX, he/she will not
communicate or disclose any information or materials regarding the 719LAX's
business practices, operating processes, personnel practices, or any information
concerning donors, benefactors, supporters or volunteers of the 719LAX or
participants in any of its programs to any third party or use such for the benefit of
any third party without first seeking and obtaining written consent of the 719LAX.
Requests for such approval should be made, in writing, to the attention of
President/C.E.O., 719Lacrosse Inc.

Volunteer understands that this agreement applies to information maintained by the 719LAX, regardless of the form in which it is maintained and includes printed material, material stored electronically or magnetically, computer security passwords, oral statements, or other media and may include, but is not limited to, names, phone numbers, addresses, giving history, employer records, participant activities, disability status and medical information and other information he/she may access in the course of his/her volunteering or service. Volunteer also understands and agrees that he/she shall be bound by the terms of this Agreement even after the termination of his/her employment with the 719LAX.

I hereby acknowledge that confidentiality and agree		bove policy regarding privacy and ns.
	Date:	Volunteer Name
	Volunteer S	gnature