COPPA Form

[Children's Online Privacy Protection Act]

The Avalon Druid Order, hereafter "ADO" or "the Order", does not publish member identity or contact information to the public except as required by law or as directed by law enforcement agencies in the course of executing their duties. Membership information is never sold or marketed to third parties, and is kept in a secure database at the ADO offices. Access to this database is restricted to five people, and use of this information is restricted to such purposes as are appropriate and necessary to conducting the regular life and business of the Order. The ADO Midwife, as one of these five persons, serves as the contact person for any questions or inquiries with regard to member records. The name and contact information for the current ADO Midwife (ado_admin@avalondruidorder.org; *subject header:* ADO Midwife) may be found at the Bylaws page of the ADO website, at the ADO members forum, and in other ADO publications.

ADO uses adult member name and contact information for the following purposes:

1. As required by law for the maintenance of a members roll.
2. In order to notify members of membership issues or community functions.
3. In order to bill or receive payment from members for paid services such as coursework or events.
4. Occasionally, for inclusion in a members directory (for internal use only). Children's names may be included in such directories only with prior written parental consent.

Except as required by law, ADO does not retain, publish, or permit parents to publish, the personal contact information of minor children (e.g. children's personal email, cell phone numbers, etc.). Parents are advised to use home phone numbers and email accounts to which they have access and oversight for all communication between the Order and minor children, and to have their children self-identify using tribes names, rather than legal names, when interacting with others online. (In the interest of safety and for emergency purposes, ADO will keep a confidential record in the member's database of each minor child's tribe and legal names.) Parents or guardians are required to supervise minor children during their use of ADO cyber resources, and to provide adequate supervision during ADO events and activities. While ADO does not itself collect "cookies" from member computers, our website host and website services providers may; therefore we advise parents to clear the computer's cache and cookies after each online session. Also, some service providers may require your child/children to register in order to use a service such as e-lists, forums, or chat. ADO has no authority over, *and assumes no responsibility for* how these services operate. Your choice to allow your child/children to register and use these services represents your legal consent to the terms and conditions set forth by the current service provider(s), as well as your agreement to hold ADO harmless for any injury or damage incurred through use of their services.

Parents or guardians may request to see their child/children's records by writing to the ADO Midwife (for contact information, see above), and providing proof of identity as the child's legal parent or guardian (e.g. ADO member number, logon and password, email with digital signature, or other unique identifiers). You may also request that these records be expunged by sending the ADO Midwife a notarised, signed, dated letter including proof of your identity. However, where expunging such records is deemed by ADO to create an unreasonable obstacle to provision of individual or community services or functions, or to impair or impede the Order's ability to respond to emergencies, ADO reserves the right to terminate membership or access to specific services, or to impose such additional limitations, requirements, terms, conditions, and/or guidelines as it deems necessary to ensure that quality of membership and the needs of our community continue to be met.

Your submission of this COPPA/Consent form shall serve as your legal consent to these, and all other member requirements, terms and conditions.

Parental Consent Form

[Granting permission for minor child/children to participate as Members of the Order]

I/We, the undersigned, _____ [mother's name/guardian 1] and _____ [father 's name/guardian 2], as the legal parents or guardians of the below-referenced minor children, permit them to participate as full member s of Avalon Druid Order (ADO), a modern druid (pagan) traditional religious organisation:

I/We do hereby attest and affirm that we have examined the teachings and methods of the ADO and its service provider(s), have contacted the ADO Members Registrar and/or Elder s with our concerns and questions , and are fully satisfied that the above-referenced organization(s) are appropriate places for the following named child/children to explore their spirituality and to worship, both individually and within such ADO member circles and groups as may gather or form for the purpose.

Therefore I/We do jointly agree and freely grant *permission and consent* for the following named child/children to participate as full member(s) of the ADO; further, that ADO teachers and/or training providers shall have unconditional leave to train our child/children in the history, lore, customs, folkways, religious beliefs, practices , and forms of worship of the Order, in the manner prescribed by its Tradition, to prepare them for a life as Avalonian Tribes (spiritual community) members and/or Druids.

Names of Child/Children for whom consent is to be given (please print):

1._____

2._____

3._____

4._____

5._____

(add additional notarised sheet s if necessary)

We further affirm and attest that:

- I/We are the legal parents or guardians of the above-named child/children and are, under the law, fully authorised to grant this Consent.
- The above-named child/children seek(s) membership within ADO freely and of their own choosing.
- As a condition of membership, we have read and understood the membership requirements and agree to uphold these, and other such requirement s and guidelines as ADO may choose to impose upon its members from time to time.
- I/We shall *not* compel our child/children either to remain within or to leave the ADO membership based upon our own individual spiritual beliefs.
- I/We agree to provide supervision as necessary and appropriate for children working with complete strangers through online media and at ADO gatherings as necessary for the above-named child/children's safe participation and in accordance with ADO requirements. I/We understand that should I/We and/or the above-named child/children prove unable to fulfil ADO membership requirements , the ADO shall retain the right to terminate said membership(s) without refund at its sole discretion.

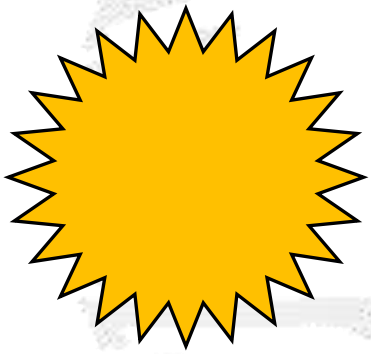
In Closing: Submission of this Consent form and related application(s) constitutes our agreement to hold ADO, its service providers, and its members harmless and seek no compensation, whether through litigation or other means, for any past , present or future injury or damage(s), whether real or perceived, which may result either directly or indirectly from our participation in the studies, spiritual practices, and other activities associated with ADO membership.

Signed this _____ day of _____ [month] , _____ [year] and witnessed by me/us and by the below signified Notary Public or Officer of the Court:

[signature of mother/guardian #1]	[mother/guardian #1's printed name]
[signature of father/guardian #2]	[father/guardian #2's printed name]

Date, signature, and seal of the witnessing Notary Public or Officer of the Court:

[Name of Authorizing Official]	[Date]



Notary Seal

Notary Signature/Number

Date