

## **DECLARATION OF ORGANIZATION POLICIES FORM**

Organization Name:	
Contact Person:	
Title:	
Phone:	Email:

I, the undersigned, a formal representative of the above organization, declare that the above organization does not directly or indirectly:

- 1. Support, promote or fund the practice of surgical or chemical abortion.
- 2. Support, promote or fund the practice of the destruction of human embryos to extract embryonic stem cells or the practice of embryonic stem cell research.
- 3. Support, promote or fund the use or distribution of artificial contraceptives including so-called emergency contraception.
- 4. Support, promote or fund the practice of human cloning.
- 5. Support, promote or fund pornography.
- 6. Support, promote or fund assisted suicide or euthanasia practices.
- 7. Support or promote same sex marriage and/or civil unions.

Signature

Date

Printed Name

[Seal or Stamp of Organization]