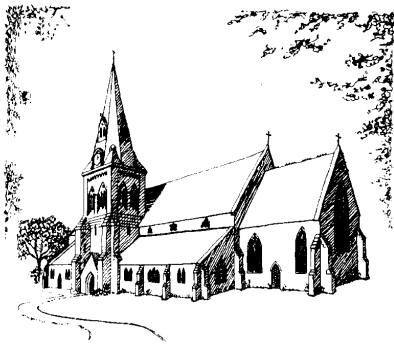


All Saints Policies



NAME _____

SIGNED _____

DATE RECEIVED _____