Confidentiality Statement

As a member of the FPA Board of Directors or member of an FPA workgroup (committee, task force advisory group, council or other), I recognize that I have a duty of care to FPA. This includes a duty of confidentiality. In connection with my FPA volunteer service, I may be given or have access to confidential or proprietary information of and about FPA (member data/information included) and third parties. Confidential Information is defined as all information that FPA considers confidential or proprietary information of or about FPA or third parties. Confidential Information may include, but is not limited to, information discussed or distributed at Board/workgroup meetings; information discussed on any Board/workgroup-only online forums; official Board/workgroup business discussed between or among Board/workgroup members in any Board/workgroup-only medium or forum; information regarding FPA's organization, operations, programs, activities, policies, procedures, practices, financial condition, or marketing strategies or plans; information discussed in FPA workgroup meetings; unpublished or pre-release versions of FPA documents or materials; internal-use-only or limited-circulation FPA documents or materials; and similar FPA information, documents or materials of a confidential or proprietary nature. I agree to not disclose or permit to be disclosed any Confidential Information, and will not appropriate, photocopy, reproduce, or in any fashion replicate any Confidential Information without the prior written consent of FPA. I agree to use reasonable efforts to maintain the confidentiality of all Confidential Information. I also agree not to use any Confidential Information for my own benefit or that of any other individual, company or organization. Confidential Information shall not include information which I rightfully obtain from a third party without comparable restrictions on disclosure or use.

I have read and understand the above policy and agree to abide by it:

_____   _____
Signature   Date

_____
Name (please print)