



INTERNATIONAL ASSOCIATION OF  
REHABILITATION PROFESSIONALS

## Finance Committee Commitment Pledge

I, \_\_\_\_\_, recognizing the important responsibility I am undertaking in serving as a member of the Finance Committee of the International Association of Rehabilitation Professionals (“IARP”) or one of IARP’s Section or Chapter Boards, hereby pledge to carry out in a trustworthy and diligent manner the duties and obligations in my role as a Committee, as set forth more specifically below.

### MY ROLE

I acknowledge that my primary role as a Director is twofold: (1) to contribute to the defining and fulfillment of the organization’s financial mission, and (2) to assist the Board in managing the organization’s financial affairs.

### MY PLEDGE

As a Director, I pledge to abide by my fiduciary duties of care, loyalty and obedience<sup>i</sup>, and to abide by IARP’s Conflict of Interest Policy<sup>ii</sup>.

Further, I understand that during the course of my service as a Committee Member I may have access to and become acquainted with information of a confidential or proprietary nature that should not be disclosed outside the Committee. I pledge that I will not disclose such confidential or proprietary information to persons outside the Committee or the Board of the parent organization, except as may be required by law.

Further, if I am on the Committee as a representative of a Section, Chapter, or Committee, I understand that as a Committee Member I am to act and vote in the best interests of the organization as a whole, and I pledge to act and vote accordingly.

Finally, as a Committee Member, I pledge to support in a positive manner all actions taken by the Committee even when I am in a minority position on such actions, and to speak on behalf of the Committee or organization only when I am authorized to do so.

If, for any reason, I find myself unable to fulfill my role and pledge, I agree to resign my position as a Committee Member.

I also understand and agree that my failure to fulfill my role and pledge subject me to potential removal from the Committee.

\_\_\_\_\_  
Committee Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Committee Member Name (Printed)

<sup>i</sup> See IARP Board of Directors Legal Responsibilities

<sup>ii</sup> See IARP Conflict of Interest Policy