

Volunteer Information

Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Home Number _____ Work Number _____

E-Mail Address _____

RELEASE

I, _____, hereby authorize **Westminster Presbyterian Church** to conduct a background check through the Washington County Sheriff's Department. A more extensive check may be done if needed. It is my understanding that results of such background check may affect my willingness to volunteer at Westminster and that all results will be kept confidential to the Children's Ministry Coordinator and the Education Ministry Team.

Signature

Full Name: _____

Driver's License Number: _____

Social Security Number: _____

If you have lived anywhere other than Washington County please list below.

Previous Address _____

Lived here from _____ to _____

Previous Address _____

Lived here from _____ to _____

Previous Address _____

Lived here from _____ to _____