

Florida Pathfinder and Adventurer Background Check List

Event: North Area Reveille Jan. 18-20, 2019



Church Name: _____

List all Adult Staff (18+)

Name: _____

(Please print)

Signature:

Club Director

Phone Number:

Email:

By signing this document, I verify that the information included above regarding the completed and cleared background check on each adult listed is accurate and true; and I am fully aware of the risk to children and our church if I do not complete this task.

I take full responsibility to ensure that only adults that have been properly screened and cleared will be allowed to attend events with our club at any time, or in any place.

Name: _____

Signature:

Pastor

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NOTARY (if not signed by the Pastor)