



# BYRON BIBLE CAMP

40546 S SHORE RD HURON, SD 57350

Hello Friend,

Thank you for being willing to serve at camp. The release form below, when signed by you, gives permission to Byron Bible Camp to do a background check. Our insurance company strongly encourages us to do background checks for counselors and staff that help or work at camp. The insurance company sees it as a way to protect our camp ministry. We are not trying to invade your privacy we are just trying to protect the ministry that God has given to us. None of your information will be share with any other institution or individual.

Thanks,

Jon M. Duba  
Executive Director

### Authorization and Request for Criminal Records Check and General Background Check

I, \_\_\_\_\_, hereby authorize Byron Bible Camp to request a police/sheriff department or private background checking agency to release information regarding any record of charges or convictions contained in its files or data base on me whether it is local, state or nationals files and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I do release the police/sheriff department or background check agency from all liability that may result from any such disclosure made in response to the request.

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Signature of applicant

Date

Print applicant's full name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Social security number: \_\_\_\_\_

Driver's license Number: \_\_\_\_\_

State driver's license issued from: \_\_\_\_\_

License expiration date: \_\_\_\_\_

**Please return a scanned copy or a hard copy to:**

Byron Bible Camp - 40546 South Shore Road, Huron, SD 57350

Email: campbyron@yahoo.com