

BACKGROUND CLEARANCE FORM



Name of Event: _____

Date of Event: _____

To provide a safe environment for our children/youth attending district-wide events, we require all counselors to have their criminal background and child abuse clearances for all youth related events. Please complete the form below.

Name of Church: _____

Leader's Name: _____

Address: _____

Phone: _____ Email: _____

Please print the name of each adult leader (including your own) who will be attending the event.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I/we acknowledge that the counselors listed had a criminal background check and have been approved to work with youth and children. A copy of these forms are on file. I/we release The Christian and Missionary Alliance and the event staff for any liability created by any action of an adult leader that has been approved.

Leader's Signature

Date

Senior Pastor's Signature

Date

For information how to acquire background clearances, contact Cheryl Grosseohme by phone 814-591-2420 or email grossoehmec@cmawpa.org.

A COPY OF THIS FORM MUST BE SIGNED BY THE PASTOR OR OTHER AUTHORIZED PERSONNEL AND RETURNED TO THE DISTRICT OFFICE BEFORE THE EVENT.

WPA District of the Christian and Missionary Alliance, 341 N Chestnut Street, Punxsutawney, PA 15767
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