



BACKGROUND CHECK CONSENT FORM

Please complete below and submit to Donna Drake, 1291 Old Kaufman Road, Canton, Texas 75103 or ddrake@lakesidecanton.com. Any information on this form will be kept completely confidential. This form is required for ages over 18 to volunteer for Night To Shine.

PLEASE PRINT LEGIBLY

Complete Legal Name: _____

Address: _____ State _____ Zip _____

Home Phone: () _____ Work: () _____ Cell: () _____

Social Security #: _____ Drivers License #: _____ State: _____

Birth date: _____ - _____ - _____ Age: _____

Are you a Member of Lakeside Baptist Church? Yes _____ No _____

This is to certify that I give my consent for Lakeside Baptist Church to acquire a background check on me. Understanding that any information received in this background check will be kept completely confidential. Understanding also, that my participation in the chosen activity may be affected by any adverse results of the background check.

Signature: _____ Date: _____