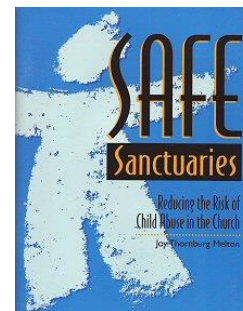


Safe Sanctuary Consent Form



Date of Class: _____

I hereby authorize Conyers First United Methodist Church to initiate and process a criminal history and driver's license background check.

Full Name (please print)

Address (House number, Street Name, City, State and Zip Code)

Sex Male // Female

Date of Birth _____

Social Security # _____

Reason for Background Check

Working with Children's Ministry

Working with Youth Ministry

Employment – I give consent to LMUMC to perform periodic criminal history background checks for the duration of my employment. Please indicate area of employment below.

Church

Preschool

Signature: _____

Date: _____

Email: _____