



National Background Screening Consent Form

I hereby authorize Protect Youth Sports to provide the results of my background check directly to the City of Milton. I further authorize the City of Milton to use the results of my background check in its consideration and decision to approve or disapprove my participation in youth recreation programs offered by the City of Milton and/or its partner volunteer organizations.

I hereby agree to defend, indemnify and hold harmless the City of Milton, its officers, boards, commissions, elected and appointed officials, employees, servants, volunteers and agents (hereinafter referred to as "City Parties") from and against any and all claims, injuries, suits, actions, judgments, damages, losses, costs, expenses and liability of any kind whatsoever, including but not limited to, attorney's fees and costs of defense, (hereinafter "Liabilities") which may result from Protect Youth Sports' completion of the background check, Protect Youth Sports' providing the results of the background to the City of Milton, or the City of Milton's use and reliance on the results of the background in its consideration and decision to approve or disapprove my participation in youth recreation programs offered by the City of Milton and/or its partner volunteer organizations. This indemnity obligation does not include Liabilities caused by or resulting from the sole negligence of the City or City Parties. Such obligation shall not be construed to negate, abridge, or otherwise reduce any other right or obligation of indemnity which would otherwise exist as to any party or person described in this provision.

I agree that upon transmittal to City of Milton, the results of the background check will lose any protected or private status and become a public record subject to disclosure pursuant to Georgia's Open Records Act, provided that the document will be redacted prior to any disclosure and in accord with the Open Records Act.

Print Name:

Date: _____

Signature: _____