

Personal References (references should be an adult 21 years or older and not a relative)

Name _____ Name _____

Address _____ Address _____

Telephone () _____ Telephone () _____

Applicant's Statement

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches in this application to give you any information (including opinions) that they may have regarding my character and fitness for children or youth work. In consideration of the receipt and evaluation of this application by Garden City Church of Christ, I hereby release any individual, church, youth organization, charity, employer, reference or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may result to me, my heirs or family, on account of compliance or any attempts to comply, with this authorization. In addition, I hereby release Hilltop Christian Camp and the Protect My Ministry organization to release any information which pertains to any record of convictions contained in its files or in any criminal file maintained on me whether local, state or national. I hereby release said organizations from any and all liability from such disclosure. I waive any right that I may have to inspect any information provided about me or any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the Bylaws and policies of Garden City Church of Christ, and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.

I further state that I have read, understand, and will follow the guidelines established in the Garden City Church of Christ "POLICIES AND PROCEDURES FOR CHILD/ YOUTH WORKERS."

Applicant's Signature _____ Date _____

If applicant is a minor, a parent or guardian signature is required by law:

Signature of Parent/ Guardian _____ Date _____

Working with children is an honor and privilege. Only approved applicants will be permitted to be in direct contact or supervision of our children. The approved applicants will not be contacted unless there is a question or concern. First time applicants should allow up to two or more weeks for approval. Applicants who are denied their request to work with children/ youth will receive a full explanation of this decision.

(For Office Use)

Approval _____ Approval Denied _____ Date Notified _____

Coordinator Notes _____
