



Volunteer Registrations are considered *incomplete* without a **CRIMINAL BACKGROUND CHECK** attached, even if you have one on file.

VOLUNTEER REGISTRATION

I am volunteering to serve in: (Check all that apply)

- | | | |
|-------------------------------------|---------------------------------|---------------------------------------|
| <input type="checkbox"/> BASKETBALL | <input type="checkbox"/> SOCCER | <input type="checkbox"/> BASEBALL |
| <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> T-BALL | <input type="checkbox"/> CHEERLEADING |

I would like to help:

- | | | |
|--|---|--------------------------------------|
| <input type="checkbox"/> HEAD COACH | <input type="checkbox"/> REFEREE/UMPIRE | <input type="checkbox"/> CONCESSIONS |
| <input type="checkbox"/> ASSISTANT COACH | <input type="checkbox"/> SCOREKEEPING | <input type="checkbox"/> OTHER |

Last Name _____ First Name _____

Address _____ City/State _____ Zip _____

Home Phone _____ Work Phone _____ Cell _____

Date of Birth _____ Gender _____ Church Home _____

Email address _____

<p>AVAILABLE PRACTICE DAYS</p> <p><input type="checkbox"/> MONDAY</p> <p><input type="checkbox"/> TUESDAY</p> <p><input type="checkbox"/> THURSDAY</p> <p>TIME that I can NOT practice _____</p> <p>Preferred GRADE to Coach _____</p> <p>GENDER to coach <input type="checkbox"/> GIRLS <input type="checkbox"/> BOYS</p>	<p>COACH'S Polo Shirt Size:</p> <p><input type="checkbox"/> Adult Small</p> <p><input type="checkbox"/> Adult Medium</p> <p><input type="checkbox"/> Adult Large</p> <p><input type="checkbox"/> Adult X Large</p> <p><input type="checkbox"/> Adult XX Large</p> <p><input type="checkbox"/> Adult XXX Large</p>
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List your Child/Children playing UPWARD. Please list the one that you want to coach as **#1**.

	<u>Name</u>	<u>Grade</u>	<u>Gender</u>	<u>Are they registered for UPWARD?</u>
1.	_____	_____	_____	YES NO
2.	_____	_____	_____	YES NO
3.	_____	_____	_____	YES NO

It is a requirement of Second Baptist Church for anyone desiring to serve in any capacity with children to complete a **Criminal Background Check**. This is of no cost to the volunteer. Please fill out a Background Check Form and return it with this form. Thank you.

_____ Yes, I have completed and attached a **Criminal Background Check**

 FOR OFFICE USE ONLY: SHELBY entry date _____ UPWARD entry date _____ Team: _____

Second Baptist Church Criminal Background Check

Please check **ALL** ministries that you are involved in at Second Baptist Church:

- Nursery
- Kindergarten
- Children's Sunday School Teacher
- Children's Church
- Children's Choir
- AWANA
- Upward/Victory Sports
- Youth Leader
- School of Arts instructor
- OneWay

PLEASE WRITE LEGIBLY

I hereby authorize Second Baptist Church to receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

Full Legal Name (print)

_____ LAST	_____ FIRST	_____ MIDDLE	
_____ MAIDEN NAME	_____ SUFFIX (Jr., Sr., etc.)	_____ NICKNAME (or name you commonly are called)	
_____ STREET ADDRESS	_____ CITY	_____ STATE	_____ ZIP
_____ SEX	_____ RACE	_____ DATE OF BIRTH	_____ SOCIAL SECURITY NUMBER

Last Previous Address:

_____ STREET ADDRESS	_____ CITY	_____ STATE	_____ ZIP
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Signature

Date

This information will only be used to acquire a Background Check and will not be used for any other reason. This form will be filed in a secure place or shredded after application process is complete.

OFFICE USE ONLY

Ministry Requesting Criminal Background Check _____

Ministry Director _____

Date Submitted _____ Date

Cleared _____

**GEORGIA BUREAU OF INVESTIGATION
GEORGIA CRIME INFORMATION CENTER**

Criminal History Consent Form

In signing below, I hereby authorize the agency in possession of this document to release any and all Georgia criminal record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

I understand that backgroundcheck.com/GBRS is requesting this information on behalf of _____ Second Baptist Church _____ and give my full consent for periodic criminal history background checks to be performed for the duration of my employment with this company.

Full Name (print: Last, First, and Middle Name)

Alias/Maiden names

Address

City

State

Zip Code

Month, Day, and Year of Birth

Social Security Number

Signature

Date