

I hereby give consent and authorize Richmond Christian School to complete a criminal history and sex offender search. I acknowledge that the sole purpose of such search is to allow me the opportunity to serve the School as a volunteer or chaperone. I understand that the School will not provide a copy of the results to me or another party. I may receive a copy of the results if I am denied the right to volunteer or chaperone a field trip at Richmond Christian School.

Full Name

Please include first name, middle name, last name and suffix

Maiden Name

(If female)

Please include first name, middle name, and last name

Address

Social Security

Date of Birth

Signature

Date
