

N.C. DISTRICT ROYAL RANGERS PERMISSION TO CONDUCT BACKGROUND CHECK

SECTION: _____ OUTPOST #: _____ DATE: _____

CHURCH: _____ CITY: _____

PASTOR: _____ CHURCH PHONE: _____

LAST NAME	MIDDLE NAME

FIRST NAME	SEX (M/F)
	<input type="checkbox"/>

FEMALE MAIDEN LAST NAME	BIRTHDATE (MM/DD/YR)
	<input style="width: 100%;" type="text"/>

SOCIAL SECURITY NUMBER	DRIVER'S LICENSE NUMBER	DL State	Age
		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

MAILING ADDRESS (P.O. BOX NUMBERS ARE NOT ACCEPTABLE, MUST BE PHYSICAL STREET ADDRESS)

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CITY	STATE	ZIP CODE	AREA CODE + PHONE NUMBER
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

EMAIL ADDRESS

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This form must be completed by any Royal Rangers leader, parent or volunteer 18 years or over that participates in any District Level Royal Rangers overnight events, including but not limited to Powwows, Training Academies, FCF events or any other event that requires an overnight stay with minors.

Please answer the following questions to the best of your ability.

During the past ten years, have you ever been convicted of a crime, **excluding** traffic violations (i.e. speeding tickets)? Yes No If yes, please explain:

Have you ever been accused of or convicted of child abuse, child neglect or any other charge or crime against a minor, sexual or physical?

Yes No If yes, please explain:

Do you consent to having a NC Conviction Information Name Check (or background check) processed by North Carolina District Royal Rangers and/or the NC State Police.

Yes, I allow a background check to be obtained.

No, I do not consent to have a background check. I understand this will affect the possibility of attending any District Sponsored Overnight Royal Rangers Events.

I understand that the North Carolina District Council of the Assemblies of God Royal Rangers Department will be conducting a background check on me and that the information gathered will not be shared with anyone other than my Pastor. I also understand that any negative information gathered could be used to determine whether or not I can participate in District Sponsored Overnight Events with minors. I give the North Carolina District Council of the Assemblies of God, Inc. permission to conduct a background check to include a criminal records check.

Please note: Incomplete forms cannot be processed

Applicant's Signature

Date

Please include a check or Money Order in the amount of **\$6.00** payable to:

NC Royal Rangers and mail to:

Becky Johnson
6316 Cape Charles Drive
Raleigh, NC 27617

"Background checks normally take two weeks to complete. If you find yourself in a tight spot and need to get your background check done quickly, it can be done, but a **\$10 dollar late administrative fee applies to accommodate for the rush. If you need a background check done quickly, send in a note with your completed form, indicating the deadline for the background check. With the note and the form, include a check for **\$16 dollars** (**\$6 dollars** for the background check and **\$10 dollars** for the administrative fee) made out to NC Royal Rangers."**

Rev 1.08