

**Arkansas Conference of the United Methodist Church  
Children's Ministries**



**Background Check Verification Form**

In order to promote a safe environment for all child and adult participants at Arkansas District or Conference Council on Children's Ministries events, each church must certify that it has conducted a background check on all persons who are 18 years or older or who will be chaperoning or working with children at the event. The background check must include a criminal background check as well as a child maltreatment registry check.

**AC(D)CCM Event Name and Date** NW District Family Bible Boot Camp - September 11-12, 2015

**Church Name** \_\_\_\_\_

**Church Address** \_\_\_\_\_

**Church Phone** \_\_\_\_\_

Please print the name of each person 18 years or older or who will be chaperoning or working with youth, including yourself, attending the event identified above.

- |          |           |
|----------|-----------|
| 1. _____ | 7. _____  |
| 2. _____ | 8. _____  |
| 3. _____ | 9. _____  |
| 4. _____ | 10. _____ |
| 5. _____ | 11. _____ |
| 6. _____ | 12. _____ |

I, \_\_\_\_\_ (Children's Leader's Name) acknowledge that

\_\_\_\_\_ (Church Name) has conducted a criminal background check and a child maltreatment registry check on all persons who will be chaperoning or working with children at the Arkansas District or Conference Council on Children's Ministries event **NW District Family Bible Boot Camp on September 11-12, 2015** and all such participants have been approved by the local church to work with children, youth and other adults. We agree to indemnify, protect and hold harmless the Arkansas Conference of the United Methodist Church for any liability related to any action of any participant being sent by

\_\_\_\_\_ (Church Name).

TWO separate signatures are REQUIRED.

1. \_\_\_\_\_  
**Trip Leader's Signature** **Date**

2. \_\_\_\_\_  
**Pastor or other church official** **Date**  
(Other than, and not related to, the Trip Leader)