

## Consent/Release Form Background Screening for Volunteer in Youth Sports

House Numb	Date of	Las Birth:			
House Numb		Birth:			
House Numb					
House Numb					
	oer & Street				
	_ State:	Zip:			
	E-Mail Address:				
	authorize and give co	nsent for USA Judo, through			
cant					
information regarding my	self. This includes th	e following:			
Employment reco	Employment records/Employers references				
<ul> <li>Criminal background records/information</li> </ul>					
<ul> <li>Training/experier</li> </ul>	nce				
<ul> <li>Personal reference</li> </ul>	ces				
<ul> <li>Addresses</li> </ul>					
on, firm or organization pro y and all claims of liability	oviding information o	r records in accordance with this			
		Date:			
USA Judo Registration Number:					
2) Check for \$16.00 made	payable to SSCI to:				
SSCI					
	ont Road Suite #100				
Marietta. GA	30066				
	House Number of House Number o	House Number & Street State:  E-Mail Address:  , authorize and give co cant information regarding myself. This includes the  Employment records/Employers refere Criminal background records/informat Sex Offender Registry check Driver's license check Training/experience Personal references Addresses  information to be obtained either in writing or von, firm or organization providing information only and all claims of liability for compliance. Succeived and the second state of the second se			

For National Office Use Only						
Date Received		Check No:		Amount		
Membership Verified			Date Forwarded		-	