



Release of Information Authorization

In connection with my application for volunteer service with NorthStar Christian Center, I authorize NorthStar Christian Center and their respective agents to solicit background information relative to my criminal record history, middle school, junior high, senior high school and college history.

I AUTHORIZE, WITHOUT RESERVATION, ANY PERSON, AGENCY, OR OTHER ENTITY CONTACTED BY NORTHSTAR CHRISTIAN CENTER, OR THEIR AGENTS, TO FURNISH THE ABOVE-MENTIONED INFORMATION.

I release NorthStar Christian Center, their respective employees and agents and all persons, agencies and entities providing information or reports about me from any and all liability arising out of the release of any such information or reports.

Name: (please print) _____

Date of Birth: _____

Place of Birth: (City) _____

County: _____

State: _____

Maiden Name: _____

Social Security Number: _____

Current Address: _____

How long did you live at this address? (Years, months) _____

(Complete previous address if current address is less than 2 years)

Previous address: _____

(Please Note: If address is a rural route or post office box, provide the city and county that your mail is delivered from.)

City: _____ County: _____

Signature: _____ Date: _____

Thank you for applying to help in the Children's / Youth Ministries of NorthStar Christian Center