



Permission; Accuracy of Information; Consent to Obtain Consumer Report
(Minor Volunteer)

Personal Information

Name of Minor Volunteer: _____ (my Child)

Address _____

Date of Birth: _____

Agreement

- 1. Authority.** I am the parent or legal guardian of my Child. I have the authority to enter into this Agreement on behalf of my Child and anyone else who has legal rights regarding my Child. If I am the only parent or legal guardian signing below, then I represent I am the only parent or legal guardian with authority to sign this Agreement on behalf of my Child.
Voluntary Participation; Permission. My Child wants to volunteer for Chapel Hill Presbyterian Church (*Chapel Hill*). I give my permission for my Child to be a Chapel Hill volunteer. I know what volunteer activities my Child will be involved in with Chapel Hill.
- 2. Accuracy of Information.** I have reviewed the Personal Information above and the information provided by my Child in the attached form titled Criminal History Background Check for Volunteers. I confirm the information provided is accurate. I will promptly notify Chapel Hill of any changes or corrections.
- 3. Fair Credit Reporting Act Background Check Disclosure.** I have received, read, and understand the Fair Credit Reporting Act Background Check Disclosure and have reviewed those disclosures with my Child.
- 4. Authorization to Obtain Consumer Reports.** I authorize Chapel Hill to obtain consumer reports for my Child at any time after Chapel Hill receives this authorization.
- 5. Authorization of Release and Indemnification.** I authorize law enforcement agencies, public and private schools, federal, state and local agencies and courts, credit bureaus, information bureaus, current and former employers, financial institutions, licensing agencies, governmental agencies, the military, and all other individuals and entities to provide Chapel Hill (and any consumer credit reporting agency acting on Chapel Hill's behalf) with any information about my Child. I agree to release and indemnify any person or organization (whether listed above or not) who provides information or references about my Child to Chapel Hill or its agents.

I have carefully read and understand this document. I understand that it includes release of claims and indemnification obligations.

Signature (parent or legal guardian)

Signature (parent or second legal guardian, if applicable)

Printed Name

Printed Name

Date

Date