



Adult Volunteer Safe Sanctuary/Risk Management Form

Form 06-10-A-NE
Revised 10-09

MUST BE SIGNED BY THE ADULT PARTICIPANT (AGE 18 AND OLDER) AND THE SENIOR PASTOR OF THE PARTICIPATING CHURCH

Note: This Form Is Required IN ADDITION TO 2011 INDIVIDUAL REGISTRATION FORM

Last Name	Middle Initial	First Name	Preferred Name

Street Address	City	State & Zip	Date of Birth (MM/DD/YYYY)

Social Security Number - Optional	10 Digit Home Phone Number	10 Digit Cell Phone Number

Valid Driver's License Number and State of Issue (Must be Valid During Program Dates)	Current Auto Insurance Company (Must be Valid During Program Dates)	Auto Insurance Policy # (Must be Valid During Program Dates)

Residence for past five years (enter up to three if different from current residence)			
Address	City	State	Number of Years

A. Have you ever been convicted or pled guilty to a crime against a person? Circle answer. If Yes, explain below

Y	N	
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B. Have you ever been convicted or pled guilty to a crime that involved the welfare of a child? Circle answer. If Yes, explain below

Y	N	
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C. Have you ever been convicted or pled guilty to a crime of violence? Circle answer. If Yes, explain below

Y	N	
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D. Have you ever failed to be re-employed, been involuntarily discharged, been fired, or been asked to resign from any position involving the supervision of minors? Circle answer. If Yes, explain below

Y	N	
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E. Is there anything in your background that, if revealed, would be an embarrassment to yourself or this ministry? Circle answer. If Yes, explain below

Y	N	
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F. Have you been convicted, or pled guilty of DUI or DWI within the past five (5) years? Circle answer. If Yes, explain below

Y	N	
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U.M. ARMY Adult Volunteer Safe Sanctuary/Risk Management Form

Please fill out the form above, sign and present to your local U.M. ARMY church coordinator. In most cases the Safe Sanctuary/Risk Management clearance will be conducted by the leadership of the church with whom you will be attending. The Senior pastor of that church must sign below indicating that all necessary background checks have been done. U.M. ARMY reserves the right to perform criminal background checks in addition to those performed by the participating church.

I UNDERSTAND THAT:

- In applying for adult volunteer participation in U.M. ARMY, the information that is furnished on the U.M. ARMY Adult Volunteer Safe Sanctuary/Risk Management disclosure form is subject to verification, which may include a criminal history check. Social Security numbers, driver's license numbers, and answers to questions contained on the form will be used in the verification of criminal history information and determination as to the qualification of the applicant under the U.M. ARMY Safe Sanctuary/Risk Management program.
- It is the right of U.M. ARMY to deny any person who has answered yes to questions A, B, C, D, E or F above, or otherwise provided by law, the opportunity to be in contact with minors at work programs.
- It is the right of U.M. ARMY to deny participation to any person who is deemed a risk to the safety of our participants, clients and integrity of our program and organization.

This disclosure form must be updated every year.

- Submission of false, incomplete or inaccurate information on this form may be sufficient grounds for disqualification from participation with U.M. ARMY.

I certify that the above statements are true and that the making of false statements, on my U.M. ARMY Adult Volunteer Safe Sanctuary/Risk Management Disclosure form, may be considered sufficient cause for immediate dismissal upon discovery thereof. I understand, and agree, that any misleading information or omission of information may be cause for dismissal. I specifically authorize U.M. ARMY, and its agents, to make inquiries of courts, law enforcement agencies, or other agents for records of criminal convictions. I understand that any inappropriate conversation or conduct with a minor or adult that is a violation of law may be grounds for dismissal. I understand that U.M. ARMY reserves the right to submit checks on individuals who have submitted applications. I agree to hold U.M. ARMY, its officers, employees, or agents harmless from any actions arising out of any background checks that may be done.

Typed or Printed Name of Adult Participant (Age 18 and Over)

X _____

Signature of Adult Participant

Date

As Senior Pastor of the participating church, I verify that the adult listed above has been approved for participation in overnight events with youth as well as mission work with elderly, disabled individuals and children. I also verify that to the best of my knowledge, the information provided on this form is true and accurate. In addition, if this adult is age 21 or over I confirm that they have had a criminal background check within the past three years. (Adults 18-20 years of age are not required by U.M. ARMY to have a criminal background check as they will not play a supervisory role in our programs.)

X _____

Signature of Senior Pastor

Date

**Participating Churches should return the Original Only to:
U. M. ARMY Northeast Office, 43 Stone Ridge Rd, Westford, MA 01886**