Adult Background Check Statement of Compliance FormThis form is REQUIRED at on-site registration.

The volunteering adult sponsors named below are known to the staff or recognized leadership of the participating church. The participating church warrants that it has used						
The church acknowledges that it is responsible for the selection and supervision of adult sponsors and further warrants that it has exercised due diligence in the selection of adult sponsors.						
Furthermore, in consideration of being allowed to attend this event, the church hereby agrees to indemnify and hold harmless the SCBO, and their agents or employees, against any and all causes of action, rights, claims or suit which may be against the SCBO, or their agents or employees, as a result of the church's negligence in the selection and/or supervision of students (18 years of age and older).						
Names of all adult sponsors (alphabetized)						
	Last Name	First Name		Last Name	First Name	
1			7			
2			8			
3			9			
4			10			
5			11			
6			12			
Church Name Address						
	City State ZIP					
Group Leader Signature Date						
Printed Name						
SCBO USE ONLY: I have reviewed and verified the completed background checks of the persons listed above.						
Signed:						
Date						