

## **BURNAMWOOD CAMP AND CONFERENCE CENTER**

Physical Address | 900 Camp Burnamwood, Irvine, Kentucky 40336 Mailing Address | PO Box 23580, Lexington, Kentucky 40523 Burnamwood Office Phone | 866-723-2572 Burnamwood Cell Phone | 859-494-9113 www.burnamwood.net | info@burnamwood.net

## Criminal Background Search Waiver Statement

It is the policy of Burnamwood Camp and Conference Center to conduct criminal background search on all individuals interested in volunteering/working with children at Burnamwood. Criminal background will be used to establish whether or not a potential volunteer/staff has a record, including, but not limited to: violent crimes, sexual abuse crimes, etc. If a potential volunteer/staff does have such a criminal record, s/he will not be placed in working with such a program at Burnamwood.

I hereby declare and agree as follows:

- 1. I authorize Burnamwood Camp and Conference Center to conduct a background search through LexisNexis or any other agency deemed appropriate, for the purpose of evaluating my application. While Burnamwood Camp and Conference Center will endeavor to restrict access to information to persons within the organization involved in the screening process, such restricted access cannot be guaranteed.
- 2. I fully and unconditionally release and forever discharge Burnamwood Camp and Conference Center and its officers, directors, agents, and employees from any actions, claims, lawsuits, liabilities, damages or losses whatsoever sustained by me or any family member of mine relating to the background search to be facilitated by Burnamwood Camp and Conference Center.
- 3. I affirm that I have read this waiver, and fully understand its contents.
- 4. In the event that any signature is delivered by facsimile transmission or by e-mail delivery of a ".pdf" format data file, such signature shall create a valid and binding obligation of the party executing (or on whose behalf such signature is executed) with the same force and effect as if such facsimile or ".pdf" signature page were an original thereof.

Date		
Signature		
Name (Type or Print)		
Street Address		
City	State	_ Zip
Current phone number:		