



## CRIMINAL BACKGROUND CHECK WAIVER AND RELEASE OF ALL CLAIMS

*Please read this form carefully and be aware that by agreeing to allow the Bloomington Park District to investigate your criminal background, you will be waiving and releasing all claims for damages you might sustain out of the criminal background check and review.*

I understand that a successful criminal background check is a condition of my employment/volunteerism with the Bloomington Park District.

I agree to waive and relinquish all claims I may have against the Bloomington Park District and their officers, agents, servants and employees, as a result of participating in the criminal background check.

I do hereby fully release and discharge the Bloomington Park District, their respective officers, agents, servants and employees from any and all claims from damages which I may have or may occur to me on account of the results of any aspect of the criminal background check.

I have read and fully understand this Waiver and Release of All Claims.

***Please read carefully and print clearly.***

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Last Name	First Name	Middle Initial
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_____	_____	_____	
Date of Birth (00/00/0000)	Sex (M or F)	Race (choose from right)	White/Hispanic.....W Black.....B Asian/Pacific Islands.. A American Indian ..... I Unknown.....U

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Address	City	State	Zip	Phone Number
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_____	<b><u>BLOOMINGDALE BASEBALL AND SOFTBALL</u></b>
Social Security Number ( <i>Last 4 Digits OK</i> )	Job Position/Sport Volunteer

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Signature	Parent/Guardian if 17 or younger	Date
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