



## YMCA of Metropolitan Dallas

### Disclosure and Authorization For Release of Information

I hereby authorize the YMCA of Metropolitan Dallas to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Education Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history record, as received from the reporting agencies, may include arrest and conviction data. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer/contract position with this organization, I also understand that as long as I remain an employee/volunteer/contract here, background checks may be repeated at any time. I understand that I will have an opportunity to review the criminal history and a procedure is available for clarification, if I dispute the record as received.

I, the undersigned, do, for myself, my heirs, executors and administrators, hereby remise, release and forever discharge and agree to indemnify and hold the YMCA of Metropolitan Dallas and the Volunteer Center of Dallas County and all of their Subsidiaries, Affiliates, Officers, Directors, Employees, Contract Personnel, or Associates, harmless from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I authorize the YMCA of Metropolitan Dallas to check my background with any or all local, county, state and federal agencies and records departments now, and in the future as necessary as long as I continue my association with the YMCA of Metropolitan Dallas as an employee/volunteer/contract member of that Association.

Full Name	_____	Signature	_____
	(Please Print Clearly)		
Social Sec.#	_____	Drivers Lic#	_____
Date Of Birth	_____	Sex	_____
Branch	_____	Race	_____
Date	_____		