TEAM BARNABAS

Please check which events:

__ Annual Enrichment

__ Sons of Thunder

APPI	LICATION	Women's Camp Growth Getaway	Men's Roundup Winter Youth Celebration
	ete and return to:		Sponsored by CB Northwes Church Nex
CB Northwest Attn: Shirley R 1315 SE 20 th Ave Portland, OR 9 Shirleyr@cbnw	e 97214		
Date of App	lication:		
-irst Name: _	Last Name:	Middle initial: _	
Age:	Date of Birth:	Male: Female:	
Oriver's Licen	se Number:	State:	Photo (optional)
	e:		
Street		City	State Zip
Briefly share	your Christian testimony:		
Please tell us	one thing God is teaching you right	now:	

If you are currently at school, please tell us the name and location of your home channels are you currently involved? REFERENCES: Please provide pastoral and personal references (other than relatives) who settings and/or have known you more than three years:			
REFERENCES: Please provide pastoral and personal references (other than relatives) who	have observed you in ministry		
Please provide pastoral and personal references (other than relatives) who	have observed you in ministry		
PASTORAL REFERENCE: (NOT A FAMILY MEMBER)			
Name: Relationshi	p:		
Email: Phone:	Phone:		
PERSONAL REFERENCE: (NOT A FAMILY MEMBER)			
Name: Relationshi	p:		
Email: Phone:			
PERSONAL: At any time have you: Been arrested for any reason? Yes No Been convicted of, or pleaded no contest to, any crime? Yes N Engaged in, or been accused of, any act of child molestation, exploitation of			
ARE YOU AWARE OF: Having any traits or tendencies that could pose a threat to children, youth Any reason why you should not work with children, youth or others?			
IF THE ANSWER TO ANY OF THE ABOVE QUESTIONS IS "YES" PLEASE EXPLAIN IN DETAIL:			

APPLICANT VERIFICATION AND RELEASE

• I recognize that CB Northwest, the organization to which this application is being submitted, is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.

- I authorize CB Northwest to contact any person or entity listed in this application, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.
- I voluntarily release CB Northwest and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.
- I agree to abide by the policies and procedures of CB Northwest both verbal and written and to protect the health and safety of the children or youth at all times.

NAME (print):		
SIGNED:	DATE:	