

ADULT CHAPERONE VERIFICATION FORM

This form is required for EVERY church bringing children/students to a MBCB sponsored overnight camp

By signing this statement, I attest that each of our church's adult volunteers and/or employees attending an MBCB overnight camp have been properly screened, including a background check for all adults (18 years and older) within the last year from an independent vendor and that our search included (at a minimum): identity research, national database, and sex offender registry.

| Signature of Pastor/Church Official | Print Name of Pastor/Church Official |
|-------------------------------------|--------------------------------------|
| Ministry Position/Role in Church | Date Signed |
| Signature of Witness | Print Name of Witness |
| Church Name | Church City |

The Mississippi Baptist Convention Board is committed to the safety and well-being of the children entrusted to our care. We strongly encourage all churches to complete the Ministry Safe Sexual Abuse Awareness training or a comparable program. For more information on a free first year's membership to Ministry Safe, please visit our website: www.mbcb.org/sart

CHAPERONE LIST

Please Print

| 1. | 2. |
|-----|-----|
| 3. | 4. |
| 5. | 6. |
| 7. | 8. |
| 9. | 10. |
| 11. | 12. |
| 13. | 14. |
| 15. | 16. |
| 17. | 18. |
| 19. | 20. |