

PASTOR'S SIGNATURE

DATE OF SIGNATURE

SPONSOR CERTIFICATION AND BACKGROUND VERIFICATION FORM

State of Texas, County of _____

this ______, day of ______, 2016.

Subscribed and sworn to before me on

TO LAKE LAVON CAMP & CONFERENCE CENTER: This letter shall certify that the names of the Group Leaders and Sponsors listed below are the only individuals who will be (Church Name) to attend, supervise, and counsel the sent by campers while at Lake Lavon Camp. This certifies that each individual named below has the requisite character, responsibility, and ability to work with and around children and youth, and are free from any propensity to commit child abuse. I/we understand that our church or organization is legally responsible for the proper selection of sponsors and their actions while acting in this capacity. This also verifies that they have passed the Child Abuse Prevention Training within the last two (2) years, completed an annual Criminal Background Check and Sex Offender Database Check and are clear of any violations, and have read the Lake Lavon Camp Sponsor Guidelines. I further verify that the results of these background checks and Child Abuse Prevention Training will be made available to Lake Lavon Camp & Conference Center upon request of the Texas Department of State Health Services within two (2) business days, and agree that our organization will be responsible for a fine of up to \$1,000 per day, per violation, if not provided. I also agree that all applications, background checks, training documentation, and other personnel documentation required by these rules shall be maintained in hard copy or electronic format for a minimum of two (2) years following that individual's last day of service. Print names of sponsors and group leaders below. Attach additional sheet(s), if needed. **CAMP NAME CHURCH / ORGANIZATION NAME** Notarized by: _____