

APPLICANT VERIFICATION AND RELEASE

I recognize that Eastside Church 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 agree to abide by all policies and procedures of Eastside Church, and to protect the health and safety of the children or youth at all times.

Printed Name: _____

Signature: _____ Date: _____