



WVU Extension Service Background Check Release 19 through 21 Year Olds

Name: _____
LAST FIRST M.I.

Email Address: _____

Address: _____

CITY STATE ZIP

Daytime Phone: _____ Cell Phone: _____

Signature: _____ Date: _____

By signing above, I affirm that the information I have given herein is true and correct. I understand I will be required to undergo a background check. A criminal record will not necessarily bar me from 4-H Membership or from attending 4-H Camp, but will be considered as it relates to membership and/or camp eligibility. I also affirm that I will disclose to West Virginia University Extension Service if my status changes after the background check. I will immediately disclose any and all pending charges or criminal convictions. I also understand that I will be required to undergo mandatory training prior to 4-H Camping and while enrolled as a 4-H member.