ADULT YOUTH WORKER SAFE SANCTUARY CONFIRMATION FORM

This statement is between the local church listed and the Tennessee Conference of The United Methodist Church:

Conference Event: _____

Church: _____

Address:_____

City: _____

Contact Person: _____Phone:(_____) _____

The following adults who are accompanying our youth to this conference event have completed the requirements for participation as an adult attendee as prescribed by the Tennessee Conference and enacted as a part of this local church's staff/volunteer screening process. This includes a background check, reference check, training on the local church's Safe Sanctuary Policy and Procedures, as well as a review of the Safe Sanctuary Procedures for District and Conference Next Gen Discipleship s Ministry Events.

This form should be returned immediately upon receipt or with the group registration form to the Next Gen Discipleship Ministry office by mail or fax.

These background checks were completed through the conference office: __Yes __ No
If No, please indicate background company._____

Signed: _____ _____
Church Pastor **Date**

Signed: _____ _____
Youth Coordinator/Director **Date**