

AMERICAN BOER GOAT ASSOCIATION™

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ABGA Certified Judge Background Check Consent

This form authorizes The American Boer Goat Association to obtain background information and must be completed by the applicant. The American Boer Goat Association will keep the completed form on file to process a periodic background check for any applicant actively volunteering with or employed by The American Boer Goat Association. _____ (applicant's complete name), hereby authorize The American Boer Goat Association and/or its agents to make an independent investigation of my background, criminal, or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information. I understand that this information may be material to my qualifications as an ABGA Certified Judge, and if applicable, during the tenure of my volunteering or employment with The American Boer Goat Association. I further understand that this form will be valid at any time after receipt of this authorization to permit The American Boer Goat Association to conduct regular background checks throughout my volunteer service or employment. I release The American Boer Goat Association and/or its agents, and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regard to the information obtained from any and all of the above referenced sources used. Full Name (Printed): Male □ Female □ Other Names Used: Present Street Address: How Long? City/State/Zip: Former Street Address: How Long? City/State/Zip: Social Security Number: Date of Birth Driver's License Number: State of License: Signature: