

# Coventry Basketball Associaton

## Criminal Record Check Consent and Disclaimer Form

**Name:** \_\_\_\_\_ **DOB :** \_\_\_\_\_  
(Please Print)

**Previous Name(s)** \_\_\_\_\_ **SS#** \_\_\_\_\_  
(Maiden and/or Prev. Married)

**Address** \_\_\_\_\_ **Town/City:** \_\_\_\_\_

**Driver's Lic #:** \_\_\_\_\_

I, \_\_\_\_\_ hereby authorize, the Town of Coventry to conduct a criminal background check.

I, hereby waive and release, any and all manner of action, cause of actions and demand of any kind, nature and description, arising from any release of this criminal background check, whatsoever against the Town of Coventry and the Coventry Police Department in both law and equity, which I may have or in the future may have.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Witnessed by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Town of Coventry