SHINE

2026 SUMMER YOUTH WEEKS

BACKGROUND CHECK POLICY

To ensure the safety of children, youth, and developmentally challenged adults attending NC Baptist events and camps, background checks are required for all adult volunteers.

Key Requirements

1. Church Responsibility: Each church must complete background checks for all adults chaperoning or participating in activities. Names of cleared individuals must be submitted on the Background Check Form at registration.
2. Background Check Providers: Churches may use any reputable background check provider. Recommended options include FirstPoint Resources, GuideOne, ProtectMyMinistry, and MinistrySafe. FirstPoint Resources provides a special rate for NC Baptist churches.

Important Notes

- Churches are responsible for safeguarding volunteer and attendee information.
- Submit a completed list of approved volunteers at event registration. Adults not on the list will be denied campus access.

Thank you for assisting us in the protection of all attendees.

Thank you for your cooperation. Again, you can choose any company from the list above to do the background checks. However, the names of all adults attending these events must appear on the form to be presented to registration when your group arrives at the site of the event. Otherwise, the adults who accompany your church group will not be allowed to remain on campus!

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Form to be taken to Caswell for Summer Youth Weeks and given at Check-in.

The following people from _____
NAME OF CHURCH

located at _____
STREET ADDRESS CITY, STATE ZIP

have been cleared by background check — performed by a professional company — to accompany, chaperone and/or work with children, youth or developmentally challenged adults at North Carolina Baptist Assembly during the week of _____.

Any person who is found to have criminal convictions related to sexual offenses shall in no case be permitted to serve in any capacity at BSCNC events.

Name of Adult	**Indicate what each person is doing, such as chaperoning, driving, leading Bible study, overseeing activities, etc.**

USE MORE THAN ONE SHEET IF NECESSARY.

Certified by the signature of the church pastor, chairman of deacons, head of personnel committee, or other church staff or member.

Position in Church: _____

Printed Name:_____

Signature: _____ Date: _____

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