



Staff Voluntary Disclosure Form

July 11-17, 2010

ABCRM Camping at Quaker Ridge Camp

6855 S Havana St, Ste 220
Centennial CO 80112
(303) 988-3900 ♦ Fax: (303) 988-0620
www.frontragecamping.org

Staff Information

Last Name: _____ First Name: _____ MI: _____
Address: _____ Phone: _____
City: _____ State: _____ Zip: _____
DOB: _____ Gender: Male Female
SSN: _____ Mobile: _____
Drivers Lic. # _____ State: _____ Exp. Date: _____
Other names by which you have been known (e.g. maiden name): _____

1. Previous residence(s) for the past five years (include college and home residences):

City: _____ State: _____ Years: _____
City: _____ State: _____ Years: _____
City: _____ State: _____ Years: _____
City: _____ State: _____ Years: _____

(Use a separate sheet if necessary.)

2. Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them?

Yes No If yes, please explain: (Use a separate sheet if necessary.)

3. Have you ever been convicted of any crime including, but not limited to, those listed below and/or any crime similar in manner to those listed below?

Yes No If yes, please explain: (Use a separate sheet if necessary.)

- a. Indecent assault and battery on a child under fourteen
- b. Indecent assault and battery on a mentally retarded person
- c. Indecent assault and battery on a person who has obtained the age of fourteen
- d. Rape
- e. Rape of a child under sixteen with force
- f. Assault with intent to commit rape
- g. Kidnapping of a child under sixteen with intent to commit rape
- h. Distribution and trafficking of narcotics or other controlled substances
- i. Distribution of alcohol to a minor
- j. Intent to commit any of the above crimes

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4. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children?

Yes No If yes, please explain: (Use a separate sheet if necessary.)

5. Are you now or have you ever been subject to any court order involving sexual or physical abuse of a minor, including, but not limited to domestic order of protection?

Yes No If yes, please explain: (Use a separate sheet if necessary.)

6. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children?

Yes No If yes, please explain: (Use a separate sheet if necessary.)

I understand that:

1. ABCRM Camping may deny employment or permission to volunteer any person who answers "yes" to any one of the questions 2-6. If hired or invited to volunteer, and ABCRM later discovers circumstances that would indicate a "yes" answer to any of the above questions, employment or service may be terminated immediately.
2. The information provided on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers.
3. ABCRM Camping may terminate employment or volunteer service of any person if that person is found, regardless of when discovered, to:
 - a. Have a history of complaints of abuse of a minor;
 - b. Have resigned, been terminated or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor; and/or
 - c. Have falsified or omitted information in this disclosure statement.

4. This disclosure statement must be updated yearly.

Signature: _____

Date: _____

Signature of Minor's

Parent or Guardian: _____

Date: _____