

**City of Panama City Beach, Florida
Parks & Recreation Department**

Background Check

Date ___/___/___

Name _____

Address _____

City, State, Zip _____

Birth date ___/___/___

Driver's License# _____ State _____

I, _____ Do hereby authorize the City of Panama City Beach Police Department; to do a background check on me, so that I may coach or assist in coaching youth sports programs sponsored by the City of Panama City Beach. I do understand that this precaution is being taken to insure the safety of our children. I also understand that the City of Panama City Beach reserves the right to terminate my coaching or assistant coaching rights for any reason, at any time.

Date ___/___/___ Signature _____

FOR NOTARY USE

STATE OF FLORIDA, COUNTY OF BAY, SWORN TO AND SUBSCRIBED BEFORE ME THIS
____ DAY OF _____ 20____, BY _____,
WHO IS PERSONALLY KNOWN TO ME OR HAS PRODUCED _____ AS
IDENTIFICATION.

NOTARY

NOTARY STAMP

PLEASE ATTACH COPY OF DRIVER'S LICENSE