

Date Received	Date Approved	CB w/Results	BV Records	NSO Records	DNA – Y/N	Date Entered in PoS

((Area above; for Office Use Only))

Carolina Foothills Resort Background Check Authorization

It is the Policy of our Club to run a background check on all first time visitors. Filling out **your** information below and **signing** this form, authorizes **Carolina Foothills Resort** to run the background check. The types of background information obtained includes Sex Offender and Criminal reports. **Ongoing Authorization:** Carolina Foothills Resort may obtain additional background reports about you without asking for your authorization again, throughout the time you are associated with us (guest or member), and as allowed by law.

If you do not authorize the background check, admittance to our Club will not be granted.

Please enter or review the information below for accuracy, then **Sign and Date one form per person.**

I hereby authorize Carolina Foothills Resort to obtain the reports identified above, using the information provided below:

Signature): _____ Date Signed: _____
(Full Name)

(Please Print)

First Name	Middle Name	Last Name	Date of Birth
Prior known aliases:			
Street Address / City / State / Zip Code:			
Prior location (City & State), if current address is less than 3 years:			
Can Be Reached Tel #: _____/_____/_____ Email: _____			

(Enter only if with you)

Children: Y / N	Names:
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If visiting as a Couple, at time of check in please **provide names of both parties** so Office staff may complete the registration process together.

AANR: Y / N	AANR #:	Exp Date:
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Please tell us how you heard about our Club: _____