



Town of Old Saybrook
Parks and Recreation Department

308 Main Street • Old Saybrook, Connecticut 06475 • Tel: 860 395-3152 • Fax: 860 395-3154

Permission to Perform Background Checks

First Name: _____

Last Name: _____

Middle Name: _____

Suffix: _____

Date of Birth: _____

Social Security #: _____

Address: _____

Town: _____

State: _____

I give the Town of Old Saybrook's Parks & Recreation Department permission to perform a criminal background check prior to possible/current employment or volunteerism by the Parks & Recreation Department.

Signed

Date

Guardian Signed
If under 18 years old

Date