



To order a background check, please complete this form and email back to: Laura Wright, lwright@nacc.org

NAPF & HOPE 2024
REQUIRED FOR ALL ATTENDEES & PARTICIPANTS
OVER 18 YEARS OF AGE

Background Check Applicant Information (all fields must be included)

First and Last Name: _____

Email Address: _____

Mobile Number: _____

PLEASE PRINT LEGIBLY

By completing this form, the Ordering User authorizes the NACCC to perform a background check using Background Checkology and understands that the NACCC is not responsible for any liability incurred as a result of participation in this background search, including loss of job or volunteer opportunity based on search results.

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