

RELEASE AUTHORIZATION

In connection with my application for membership to the North Whidbey Sportsmen's Association, I understand that an investigative consumer report may be requested that will include information as to my character, work habits, performance and experience. Further, I understand that you will be requesting information concerning credit history and criminal history from various along with other public records available.

The following must be filled out completely for your application to be considered. (Please print).

Last Name	First Name	MI	Date of Birth	Race	Sex	Social Security #	
Place of Birth (City/State)	Current Address		City	State	Zip	Driver's License # State	
Other Last Names Used	Other States and Counties I have lived in as an adult...		State	County	Zip	From (year)	To (year)
		1					
		2					
		3					
		4					

Have you ever been charged or convicted of a crime: Yes No
 If yes, what State & County: _____ what was the nature of the crime
 (give details): _____

*The above information is to be used only for identification and investigative purposes.

I HERBY AUTHORIZE, WITHOUT RESERVATION, ANY LAWFUL ENFORCEMENT AGENCY, ADMINISTRATOR, STATE AGENCY, INSTITUTION, OR INFORMATION SERVICE BUREAU, CONTACTED BY ORCA INFORMATION, INC TO FURNISH THE ABOVE-MENTIONED INFORMATION.

I further acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original.
 This release includes all state and federal agencies.

Today's Date: _____ Signature: _____

This information is being verified by ORCA Information, Inc. any information or questions should be directed to the following address:

ORCA Information, Inc.
 P.O. Box 277
 Anacortes, WA 98221
 (800) 341-0022
 (360) 588-1633