

## DISCLOSURE AND AUTHORIZATION FORM

Metro East Softball Association (the "Company") will procure a consumer report and/or investigative consumer report on you in connection with your volunteer application. Intelius Inc., a consumer reporting agency, will obtain the report for the Company. Intelius is located at 500 108th Avenue NE, 25th Floor, Bellevue, WA 98004, and can be reached at (425) 974-6100.

The report may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include, but are not limited to: [***credit reports, social security number verification, criminal records checks, public court records checks, driving records checks, educational records checks, verification of employment positions held, personal and professional references checks, and licensing and certification checks***] The information contained in the report will be obtained from private and/or public record sources, including sources identified by you in your volunteer application or through interviews or correspondence with your past or present coworkers, neighbors, friends, associates, current or former employers, educational institutions or other acquaintances.

Provided to you with this authorization is a summary of your rights under the Fair Credit Reporting Act in a form prescribed by the Federal Trade Commission. Please do not sign the authorization until you have reviewed this summary.

You also are entitled to request more information about the nature and scope of the report we are requesting your authorization to obtain by submitting a written request to MESA Softball PO Box 664 Forney, TX 75126.

## AUTHORIZATION

I have carefully read and understand this notice and authorization form and I have read and understand the "Summary of Your Rights Under the Fair Credit Reporting Act" provided with this form. By my signature below, I consent to the release of consumer and/or investigative consumer reports to the Company as described above and consistent with the requirements imposed on the Company as described in the Summary.

I understand that, to the extent allowed by law, information contained in my volunteer application or otherwise disclosed to the Company by me before, during or after my volunteer work, if any, may be utilized for the purpose of obtaining such consumer reports and/or investigative consumer reports about me.

Volunteer Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

\_\_\_\_\_  
Present Address

\_\_\_\_\_  
City/State/Zip

Social Security Number \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State Issued \_\_\_\_\_

Professional License Number: State \_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_

### FOR IDENTIFICATION PURPOSES ONLY

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date