



Background Check/Motor Vehicle Report Request Form

Club _____

Club Rep Contact _____ ph# _____

The below members are requesting a background check/Motor Vehicle Report through USA Synchro performed by NCSI. Please provide your full legal name (printed legibly) and your signature below. This will be your permission for USA Synchro to provide the results of the background check/ MVR to the above club representative contact. Also, this will serve as an agreement for the club or individual to be billed for the cost of this service.

NAME

SIGNATURE

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*This completed form will need to be returned to the Education Director before registration with NCSI. Please mail or fax to the address/ number below to the attention of Kevin Warner, or scan and email to: kevin@usasynchro.org.