

Hockey Northwestern Ontario 1224 Amber Drive | Thunder Bay, ON | P7B 6M5 phone 807.623.1542 | fax 807.623.0037 www.hockeyhno.com

Date of Request:

As the authorized representative of **Hockey Northwestern Ontario**, I hereby request that the Local Police services conduct a Vulnerable Sector Check (VSC)

As the authorized representative of a person or organization that is responsible for the well-being of one or more children or vulnerable persons as defined in Section 6.3(1) of the Criminal Records Act, I hereby request that the Local Police Services conduct:

Candidate:	
Address:	
Who will be volunteering as a:	
For (MHA, League, Team):	
Part 2(1)(c) of the Criminal Records Regularisation is one of trust or authority towards	ation requires applications for VS checks to show how the rds that child or vulnerable person.
Description of duties:	
Jim Fetter	Executive Director
Authorized Representative	Position Title
im Fetter	(807) 623-1542 jfetter@hockeyhno.com
Signature	Phone # and Fmail

