

Garden City Minor Hockey Association

P.O. Box 27025 Lakeport Post Office 600 Ontario Street St. Catharines, Ontario L2N 7P8 905-646-7264 www.gcmha.ca

CRIMINAL OFFENCE DECLARATION

Name:_____

I,

OMHA Centre: Garden City MHA

(Print Name)

____, hereby declare that:

I have no convictions for offenses under the Criminal Code of Canada as outlined in the OMHA Police Record Check Policy, up to and including the date of this declaration for which a pardon has not been issued or granted under the Criminal Records Act (Canada).

OR

I have the following convictions for offenses under the Criminal Code of Canada as outlined in the OMHA police Record Checks Policy, for which a pardon under the Criminal Records Act (Canada) has not been used or granted:

Signature:_____

Date:_____

Please complete and submit to the GCMHA Office.