



CLARINGTON GIRLS HOCKEY ASSOCIATION

91 King Street E PO Box 172 Bowmanville, ON L1C 5E2

RE: VOLUNTEER LETTER

Full Name:

Full Address:

Date of Birth:

Telephone Number:

In order to apply for a volunteer position with the Clarington Girls Hockey Association, _____ must undergo a Criminal Records Check (CRC) with a Vulnerable Sector Check (VSC).

They have applied for the following position _____ within our organization. The Clarington Girls Hockey Association is a Hockey Association for players under the age of 22. This position involves interacting with children under 18 and as such a CRC/VSC is required.

Signature of Individual: _____

Date: _____

The individual as mentioned above has applied for a volunteer position with the CGHA and hopes to receive a volunteer fee discount for this service.

If there are any questions, please feel free to contact me.

Jason Armstrong
Wellness and Safety Director
wellness@claringtonflames.ca