

PRINT NAME:						
DATE OF BIRTH:						
POSITION:	Mont	h	/	Day	/	Year
TEAM/ASSOCIATIO	ON:					
l,	(please p	print)			here	by declare that:
I have no convictions or outstanding charges for offences under the Criminal Code of Canada as specified in the Northern Ontario Hockey Association/North Bay Minor Hockey Association Policy for Police Record Checks 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).						
Signature of Application	ant:					
Date:						
OR						
I have the followin specified in the N Association Policy Records Act (Canad	orthern Ontarion for Police Recor	o Hocke d Check	y Asso s for w	ciation/N hich a pa	orth Bay	/ Minor Hockey
Signature of Applic	ant:					

Date: