

## **Slave Lake Minor Hockey Association**

Box 941 Slave Lake, AB T0G 2A3

	Name:	
	Address:	
	Phone:	<u> </u>
	Position:	
I,	, declare	no change in status on my
Criminal Record Check	, Child Intervention Check or Vulnerable S	Sector Check since my last
Criminal Record Check	with Slave Lake Minor Hockey Association	on.

Date

Signature