



"Respect All, Fear None"

Orillia Girls Hockey Association, PO Box 292, Orillia, ON, L3V 6J6

Office: (705) 329-3336

www.orilliagirlshockey.com

2025 05 05

To Whom It May Concern,

This Letter is to confirm that _____ has taken
on the volunteer position of _____ with the
Orillia Girls Hockey Association. We require a Criminal Reference Check including the Vulnerability
Sector Screening on the above mentioned individual.

We request your office stamp this letter and provide a copy to the requestor in order to provide a
record of the date submitted for our records.

Should you have any questions, please feel free to contact me directly.

Sincerely,

Darrin Dunn
President
Orillia Girls Hockey Association