"Respect All, Fear None"

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

Office: (705) 329-3336

www.orilliagirlshockey.com

2025 11 06

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 requester 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