

 **Vegreville & District Minor Hockey Association**

 **PO BOX 1725**

 **Vegreville Alberta T9C 1S8**

**RCMP & Enforcement Services**

**6820 AB-l 6A W**

**Vegreville, Alberta**

**T9C 0A3**

**Dear Sir/Madam:**

**(*name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***(address) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**The above person is preparing to be a volunteer for VDMHA and**

**needs to provide a Criminal Record Check with Vulnerable Sector Screening for this**

**purpose.**

**They will be volunteering as a Team Official and will be in close contact with children ranging in age from 3 to 17 years old.**

**This is strictly a volunteer position and no monetaries will be involved.**

**Please contact the VDMHA president if any questions or concerns arise.**

**president@vdmha.com**

**Thank you**

**Sincerely,**

 ***Brad Morrow***

Brad Morrow

**President, VDMHA**

*(Please present this letter to an office staff member at the above address. Will need to provide 2 pieces of identification.)*