



## 2024-2025 OWHA OFFICIATING PROGRAM

225 Watline Avenue, Mississauga, Ontario L4Z 1P3

AUGUST 2024

### **Dear OWHA Official:**

Welcome to the 2024-2025 Hockey season! Enclosed please find your OWHA Referee Registration Form. These registration forms must be completed by all officials who take an OWHA Clinic or crossover to the OWHA for the 2024-2025 season. Completed forms should be emailed to [clinics@owha.on.ca](mailto:clinics@owha.on.ca)

**NOTE: The deadline to complete the courses and submit the OWHA registration form is prior to officiating this season is no later than December 31, 2024.**

Officials **under the age of 18 will not** be required to obtain a Police Record Check OR Criminal Records Check or sign a declaration form.

On Ice Officials **18 years of age and over are required** to submit a Vulnerable Sector Check (VSC) and a Declaration Form each year.

The OWHA Screening Policy has been updated for the 2024-2025 so that Criminal Record Checks will no longer be accepted when submitting a new record check. All On Ice Official must adhere to this Policy and submit yearly screening as set out below to be eligible to participate.

Every three (3) years On Ice Officials will be required to submit a new Vulnerable Sector Check (VSC). All On Ice Officials must adhere to this Policy. If you already have a valid screening (not expired) that has been submitted via the Screening Submission Portal, please proceed to the cycle year you are currently in.

**i.e.** You have a valid screening (either VSS or CRC) that expires May 2025 or May 2026, you are only required to submit the Declaration form through the Screening Submission Portal.

All VSC Documents must be submitted through the [Online Screening Submission Portal](#)

If the on-ice official is deemed ineligible through review of their VSC or online Screening Declaration, they will be notified.

Officials reaching the age of 16 on or before December 31, 2024, will be eligible to re-certify at Level 2. Individuals in this category should remit the fee and register for a Level 2 Re-Certification clinic. These forms must be completed in full and returned to the OWHA office via [clinics@owha.on.ca](mailto:clinics@owha.on.ca). If you have any questions regarding this, please email [clinics@owha.on.ca](mailto:clinics@owha.on.ca)

**Should you choose to register with the OWHA as an on-ice official for the 2024-2025 season, you must complete in full all forms attached here and email them to the OWHA office via email to [clinics@owha.on.ca](mailto:clinics@owha.on.ca). The forms can be completed electronically, signed and submitted.**

Card and cresting will only be mailed out once we have verified that the official has completed all the required components, and the Officials Registration forms have been received.



## 2024-2025 OWHA OFFICIAL'S REGISTRATION

225 Watline Avenue, Mississauga, Ontario L4Z 1P3

[www.owha.on.ca](http://www.owha.on.ca)

PLEASE PRINT (all \* fields are mandatory)

Gender: F M

\*Name: OWHA Ref #: \*Birth Date: DD/MM/YY  
\*Address: \*City: \*Postal Code:  
\*Email:  
\*Tel #: Home \*Cell #:

Emergency Contact Name: Home #: Cell #:

Please complete the following:

Current HCOP Level: Re-certifying at HCOP Level:

**PROCEDURE: to achieve 2024-2025 HCOP certification with the OWHA.**

Please check all the appropriate boxes below:

I have made the appropriate online payment through my HCR account.

I have read, signed & returned the OWHA Code of Ethics for Officials with this registration form:

I understand that all OWHA sanctioned activities must adhere to all federal, provincial, municipal, PHU requirements as well as all OWHA By-Laws, Regulations, Policies & Procedures. The strictest requirements must be followed.

### **IMPORTANT NOTE:**

**Hockey Canada insurance is valid for currently certified & registered officials officiating OWHA/Hockey Canada sanctioned games only.** 2024-2025 HCOP certification may be obtained through any Branch/Member Partner authorized by Hockey Canada. Hockey Canada insurance **does not** cover unsanctioned hockey games/events (i.e., high school, college, university, industrial league etc. or games where only one team is registered). **It is the responsibility of the official to confirm the status of the team/association/league for which you plan to officiate hockey games.**

*Information on this form will be used for OWHA purposes including, but not limited to supervision and officiating assignments. From time to time, the OWHA may use or disclose to third parties, the personal information collected on this form for the purposes of sanctioned tournaments as well as for the purposes of offering additional products and services including promotional items which may be of interest to officials.*

*If you do not wish the OWHA to use the personal information for these purposes, please check this box*

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**Hockey Canada Officiating Program  
Ontario Women's Hockey Association**



## **Official's Code of Ethics**

The Hockey Canada Officiating Program – Official's Code of Ethics, provides guidance to registered officials across Canada. The Hockey Canada Branches and their members should expect from Hockey Canada Officiating Program officials the highest possible standards of personal integrity, competence, sound judgment and discretion. Developed by the former Hockey Canada Referees' Committee, the Official's Code of Ethics is its' public declaration of an official's obligation to herself/himself, her/his peers and the game.

### **I Will...**

- ◆ do the best job I can in each game, no matter what the category of hockey.
- ◆ always show respect for my fellow officials, the players, coaches, administrators, fans and volunteers.
- ◆ study and continue to improve my knowledge of the OWHA/Hockey Canada playing rules, the OWHA/Hockey Canada Officiating Program policies and procedures.
- ◆ represent myself and the rules of the game as fairly and as accurately as possible at all times.
- ◆ always be unquestionably impartial, keeping a professional and appropriate distance from teams.
- ◆ understand that the use of alcohol is not encouraged and is totally unacceptable on game days. The use of illicit drugs is against the law.
- ◆ uphold the philosophy and right of all hockey participants to "Fair Play" and support the Shared Respect Initiative and penalize accordingly all violent acts.
- ◆ endorse and support the OWHA Values
- ◆ raise the standard of play in each game that I officiate.
- ◆ be supportive of my fellow on-ice and off-ice officials at all times, even when I am a spectator, player, team official, administrator or volunteer.
- ◆ accept the fact that I will make mistakes, but I will not get frustrated or let this learning process affect my performance or my professionalism.
- ◆ contribute to the continuing growth of the Hockey Canada Officiating Program and its officials within the OWHA through support, encouragement and positive attitude.
- ◆ contribute to the continued growth of the officiating program and its officials within the OWHA through support, encouragement and a positive attitude.
- ◆ respect and accept constructive feedback from supervisors and the assignments I receive from my administrators.

*By registering with the OWHA in the Hockey Canada Officiating Program implies that I understand and will comply with the Official's Code of Ethics. Officials not complying will be subject to disciplinary action.*

*Signature:*

*OWHA Ref #:*

*Print Name:*

*Date form completed:*

*Please sign and return this copy of the HCOP/OWHA Official's Code of Ethics with your 2024-2025 OWHA Official's registration.*



**ONTARIO WOMEN'S HOCKEY ASSOCIATION**  
 225 Watline Ave., Mississauga, Ontario L4Z 1P3  
 www.owha.on.ca



**OWHA CRIMINAL OFFENCE DECLARATION FORM**

Print Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
*Month/Day/Year*

HCR ID#: \_\_\_\_\_ Phone #: \_\_\_\_\_

Current Address: \_\_\_\_\_

OWHA Ref #: \_\_\_\_\_ Member: \_\_\_\_\_  
 OWHA/OMHA/GTHL/Alliance etc.

Clinic Location: \_\_\_\_\_ Clinic Date: \_\_\_\_\_  
Name of City, or if taken ONLINE *Month/Day/Year*

Failure to execute this process will be in violation of the OWHA Screening Policy. This will mean that the official will be considered not in good standing and may be subject to further discipline.

**Please ensure that you check all the boxes below that apply.**

I, \_\_\_\_\_, hereby declare that:  
**(Print Name)**

I have no convictions for offenses under the Criminal Code of Canada as specified in the OWHA Screening Policy, 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).

I have no convictions for offenses in any other country, up to and including the date of this declaration for which a pardon has not been issued or granted.

I have no investigations or charges with any criminal matters.

**OR**

I have the following convictions for offences under the Criminal Code of Canada as specified in the OWHA Screening Policy for which a pardon under the Criminal Records Act (Canada) has not been issued or granted:

I have the following convictions for offenses in another country up to and including the date of this declaration for which a pardon has not been issued or granted.

Supplementary Information, Including Outstanding Charges, Warrants or Orders.

DATE	LOCATION	CHARGE	DISPOSITION

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete and submit this document along with your OWHA Registration Forms to the OWHA via [clinics@owha.on.ca](mailto:clinics@owha.on.ca)  
**NOTE: This form will NOT be accepted, and your registration will NOT be processed if it has not been completed in full.**