HOCKEY CANADA
CONSENT FOR CRIMINAL RECORD SEARCH

Full Name: _____ _____
Surname **Given Name**

Place of Birth: _____ _____ _____
City **Province** **Country**

Other Names: _____ _____
(Maiden, birth, alias) **Surname** **Given Name**

Birth Date: _____ _____ _____
Year **Month** **Day**

Current Address: _____
Number **Street** **Apt No.**

_____

City **Province** **Postal Code** **Telephone**

Whereas I am interested in being considered for a sensitive position of trust and well-being of Hockey Canada participants and I am required by Hockey Canada to disclose whether or not I have any convictions or have been charged under any federal or provincial enactment:

And whereas I understand that disclosure of a criminal record may not necessarily preclude me from performing duties/functions/responsibilities I am interested in:

And whereas I understand that, if Hockey Canada, the Hockey Canada Branch, the Hockey Canada Minor Hockey Association, or the Hockey Canada League should decide any conviction or charge disclosed might preclude me from being involved, I will be given an opportunity to see and discuss that criminal record to determine whether or not my criminal record indicated that I present a risk of physical or sexual abuse to participants.

I therefore, authorize the RCMP, other Provincial Police or the Municipal Police Service on my behalf to inquire into and determine whether or not I have a criminal record, and also make to the Hockey Canada member a full and complete disclosure of any criminal record they may find. I also make this authorization with the understanding that I may be required to provide my fingerprints to verify a criminal record and the fingerprints will be returned to me when the record is adjudicated.

_____
Signature **Date**

NOTE TO POLICE

The above-named individual has consented to release information to Hockey Canada, or Hockey Canada member Branch, Minor Hockey Association or League. Please check the individual=s record and indicate the results on this form.

Please forward the completed form and fingerprints if necessary to: _____

_____

Attention: _____

_____
Signature **Title**

POLICE USE ONLY - RESULTS OF RECORD CHECK

Results of record search is merely a record, or lack of official contact with policy agencies, not an affirmation of good character.

A search of (check appropriate category):

__ **The Central Repository for Criminal Records for Canada**

__ **Index of** _____
(Police agency conducting check)

in the above name and birthdate shows:

__ **No Record**

__ **A record exists on local index, and a copy, certified by the individual, is attached.**

__ **A Central Repository Record exists, has been verified by fingerprint comparison, and a copy is attached.**

_____ _____ _____
Name and Signature **Badge Number** **Year/Month/Day**