



North Glengarry and Stormont Minor Hockey Association



Greg Nolan - President
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1-613-294-4773

Date _____

To whom it may concern

Our parent/volunteer (Name) _____,
would like to volunteer (non-paid) to help with coaching, training
or managing our North Glengarry and Stormont Minor Hockey
Association. As part of our mandate he/she is required to obtain a
Police Vulnerable Sector Check.

The North Glengarry Stormont Minor Hockey Association requires
that all their Officials and on ice officials (over 18 years of age)
when volunteering their time with our youth obtain a Police
Vulnerable Sector Check through their local Police Services.

(Name) _____, the applicant
providing this letter is a volunteer in our organization. We request
a Police Vulnerable Sector Check on this person, at your earliest
convenience.

If you require additional information or clarification concerning the
submission of this letter, please do not hesitate to contact me at
1-613-294-4773

Thank you

Greg Nolan