



Ontario Minor Hockey Association
25 Brodie Drive, Unit 3, Richmond Hill, Ontario, L4B 3K7
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Go to the net at: www.omha.net · E-mail: omha@omha.net

CRIMINAL OFFENCE DECLARATION

Name: _____

OMHA Centre: _____

OMHA HCOP Number: _____

I, _____, hereby declare that:
(Print Name)

- I have no convictions for offenses under the Criminal Code of Canada as outlined in the OMHA Police Record Check 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).

OR

- I have the following convictions for offenses under the Criminal Code of Canada as outlined in the OMHA police Record Checks Policy, for which a pardon under the Criminal Records Act (Canada) has not been used or granted:

Signature: _____ Date: _____

Please complete and submit in the envelope provided, to the Recertification Clinic you attend. If completing a crossover Registration, this form must accompany your Registration/Payment.

Inquiries: Contact Mr. Bill Hutton, Risk Management Officer, OMHA Office.

Office Use Only: Received on _____

Recorded by _____

Member of:

