



WYOMING MINOR BALL ASSOCIATION  
BOARD OF DIRECTORS  
Box 1069 | WYOMING, ONTARIO | N0N 1T0

## OFFENCE DECLARATION FORM FOR THE 2023-2024 BALL SEASON

Name: \_\_\_\_\_

Position Held: \_\_\_\_\_

**I DECLARE** that since my most recent Vulnerable Sector Screening criminal background check (VSS) provided to Wyoming Minor Ball during the \_\_\_\_\_ season that:

- ☐ I have **not** been convicted of any criminal offences under the *Criminal Code of Canada*.

**OR**

- ☐ I have been convicted of the following criminal offences under the *Criminal Code of Canada* for which a pardon under Section 4.1 of the *Criminal Code of Canada Records Act of Canada* has **not** been issued or granted to me.  
List of Offences:

1. Date of Offence: \_\_\_\_\_

Conviction: \_\_\_\_\_

**FURTHERMORE**, for as long as I am associated with Wyoming Minor Ball Association, I agree to notify the WMBA Manager of Compliance within 1 business day of any criminal charges which are laid against me.

By signing below, I acknowledge that this declaration is only valid for the 2023-24 season with Wyoming Minor Ball, should I continue to volunteer in any capacity with Wyoming Minor Ball, I will provide a valid Vulnerable Sector screening check (every 3 years) or valid signed declaration.

DATED at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
(LOCATION) (DATE) (MONTH) (YEAR)

\_\_\_\_\_  
Signature

Inquiries: Steve Duff, Manager of Compliances or Matt Helps, President  
If completed electronically please return to [wyoingminorballassociation@gmail.com](mailto:wyoingminorballassociation@gmail.com)

Office Use Only:	Received on _____	Recorded by _____
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WMBA Secretary		