



MOUNT BRYDGES AND DISTRICT ATHLETIC ASSOCIATION

BOX 31

MOUNT BRYDGES, ONTARIO, N0L 1W0

NAME: _____

TEAM: _____

POSITION: _____

This letter is to confirm that the above named individual requires a **Vulnerable Sector Screening** for a volunteer position with the Mount Brydges & District Athletic Association (Mount Brydges Minor Hockey) for the 2024-2025 effective June 25, 2024.

T. Frederick

Tiffany Frederick
MBDAA President
mbcougarspresident@gmail.com

