



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 2025-2026 season, effective May 12, 2025.

A handwritten signature in black ink that reads 'T. Frederick'.

Tiffany Frederick
MBDAA President
mbcougarspresident@gmail.com