
ScreeningForm

APPLICATION & DISCLOSURE STATEMENT

The Potomac Valley Amateur Hockey Association (PVAHA) of USA Hockey will not authorize or sanction in any of its programs that it directly controls any volunteer or employee who has routine access to children (anyone under the age of majority,) who refuses to consent to be screened by PVAHA prior to being issued acceptance/approval for routine access to the children who take part in PVAHA programs.

PLEASE NOTE: All information will be maintained by PVAHA, in strict confidentiality. If there are questions please contact the PVAHA Background Check Administrator - Mike Bancroft email: mbancroft@jjma.com phone: 410 849-5438 or 410 693-5533.

PVAHA Volunteer**Application and Disclosure Agreement**

(Please Print)

Last Name	First Name	Middle Initial
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Address	City	State	Zip Code
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County	Association(s)
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Social Security Number	Driver's License Number State	Expiration Date
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Date of Birth	Home Phone	Work Phone
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Previous Address(s) if located in another state within the past 10 years

I have read and understand that a person may be disqualified and prohibited from serving as a volunteer of USA Hockey, PVAHA if among other things, the person has:

- o Been convicted (including crimes the record of which has been expunged and pleas of "no contest") of a crime of child abuse, sexual abuse of a minor, physical abuse, causing a child's death, neglect of a child, murder, manslaughter, felony assault or any assault against a minor, kidnapping, arson, criminal sexual conduct, prostitution related crimes, or controlled substance crimes.
- o Been adjudged liable for civil penalties or damage involving sexual or

physical abuse of children.

- o Been subject to any court order involving any sexual or physical abuse of a minor, including, but not limited to domestic order or protection;
- o Had their parental rights terminated;
- o Has history with another organization (volunteer, employment, etc.) or complaints of sexual or physical abuse of minors;
- o Resigned, been terminated or been asked to resign from a position, whether paid or unpaid, due to a complaint(s) of sexual or physical abuse of minors;
- o Has a history of other behavior that indicates they may be a danger to children in the USA Hockey, PVAHA hockey program.

Do any of the above apply to you? **Please Circle one: YES or NO**

If **YES**, please describe on an attached sheet. All responses are kept in strictest confidentiality. If you mark **YES** without explanation, you will automatically be suspended from further USA Hockey, PVAHA volunteer activities for lack of required registration materials.

I certify that all information given by me in this application is true and correct to the best of my knowledge. I understand that false or misleading statements made by me or consequential omissions of any kind in the application process are significant cause for my not being accepted as a volunteer/employee or for my dismissal no matter when discovered. I authorize USA Hockey, PVAHA to investigate all information contained in this application. The employers, organizations, and individuals name are authorized to give you any and all information regarding my employment, volunteering, character, fitness and qualifications (including opinions) that they have about me. In consideration of the evaluation of this application by USA Hockey, PVAHA.

I HEREBY WAIVE, RELEASE AND DISCHARGE USA Hockey, PVAHA, all employers, Organizations and individuals, and any other persons or entities from liability for all damages and losses of whatever kind or nature, except liability for willful or intentional acts or punitive damages, that may result from compliance or attempts to comply with this authorization.

Signature _____ Date _____

Form is to be submitted to: PVAHA Background Check
159 Friar Tuck
Sherwood Forest, MD 21405

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