



OVA Club Information Form 2019-2020 Season

Club Contacts are to complete the following Club Information Form and return the signed document to the OVA office via email to clubform@ontariovolleyball.org.

Note: If the form does not have a valid signature, or the declarations on page 2 are not checked, the form submitted is not valid.

Club Information Forms are to be submitted to the OVA prior to any Club team participating in an OVA event. Clubs not submitting this Form prior to competing will be subject to the sanctions outlined on Page 3.

Club Name

Club Address

Club Contact Name:

Club Phone Number:

Club Email Address:

Club Website:

Club Description:
 (i.e. non-profit or for profit organizational structure; types of programs offered)

NPO# or Business Number:

Please attached incorporation or letters of patent document.

Executive Structure: (if more space is required please attach an additional sheet)

Name & Address	Executive Position	Email Address	Phone Number	2019/2020 Screening Disclosure Form Signed and Completed (Y/N)
Ex. Joe Smith, 1 Bay Rd, Toronto A1B 2C3	President	jsmith@abc.ca	416-123-4567	Y

Club Staff: (if more space is required please attach an additional sheet)

Name	Position	NCCP #	PRC/VSS (date stamp by the Police Dept.)	2019/2020 Screening Disclosure Form Signed and Completed (Y/N)
Example: Joe Smith	Head Coach - 18U Boys	123456	August 5, 2018	Y

Note: As per section 7 of the OVA's Screening Policy, any and all individuals applying to volunteer or work in or with the OVA or its programs, activities, or members must participate in the OVA's screening process.

These individuals must obtain a Police Records Check ("PRC"), and Vulnerable Sector Screening ("VSS") from their local police service every three (3) years. The cost of the PRC and VSS is to be borne by the applicant. The above referenced individuals must also complete an OVA Screening Disclosure Form annually and in the case of a transfer from out of province or country, provide a letter of good standing from the applicant's previous volleyball organization.

Each Club is responsible for insuring that the appropriate screening documents have been obtained prior to allowing an individual to participate in its programs or activities. Please note that by law, Clubs are not permitted to keep originals or copies of PRC/VSS forms on file for staff/volunteers/members of their club, so forms should be returned to the owner upon viewing. Clubs are required to keep a list of names of all of the PRC/VSS forms that have been submitted and reviewed, the dates they were issued, the club representative who reviewed the forms and any other pertinent information as a result of the screening. The Club must also keep a copy of the above individuals' OVA Screening Disclosure Forms. If there are any incidents noted on the PRC/VSS document or the OVA Screening Disclosure Form the Club must immediately forward the forms to screening@ontariovolleyball.org for review by the Screening Committee.

The OVA reserves the right to perform random spot checks with respect to screening throughout the year. All OVA members are responsible for keeping their police checks on file for three years and for providing a signed copy of the OVA Screening Disclosure Form to their Club administrator on an annual basis. Upon request by the OVA, all Clubs are required to present the details of the PRC/VSS document review for the above referenced individuals and copies of each individual's OVA Screening Disclosure Form.

For more information on the OVA Screening Policy, please visit www.ontariovolleyball.org, About/Policies and select "OVA Screening Policy".

Provide the name and contact information for the person responsible for police/volunteer screening process within your Club:

Name	Email Address	Phone Number
<i>Example:</i> Joe Smith	jsmith@abc.ca	416-123-4567

House League/Recreational Programs:

Name of Program	Age & Gender Offered	Length of Program	Number of Participants
<i>Example:</i> 12U House League	12U Co-ed	12 Weeks	36

Declarations:

On behalf of the Club name listed above, I verify, as a duly authorized representative of the Club, that the Club has followed the OVA Screening Policy and that any individual intending to participate in the Club or its programs and activities will have a valid police record check and vulnerable sector screening completed within the last three (3) years. I also verify that the Club has documented its review of such documentation and has received a completed and signed copy of the OVA's Screening Disclosure Form for the current season all of the aforementioned individuals.

On behalf of the Club name listed above, I verify, as a duly authorized representative of the Club, that the Club will have all completed **OVA Release of Liability, Waiver of Claims and Indemnity Agreements** and/or **Informed Consent and Assumption of Risk Agreements** on record for all athletes registered with the Club and all Club staff (executive, coaches, managers) by each team's first practice. Please note that in order to be eligible to participate in an OVA event or to be covered by the OVA Insurance Policy, individuals must be registered through the National Registration System (NRS).

On behalf of the Club name listed above, I verify, as a duly authorized representative of the Club, that the Club will have on record for all athletes registered with the Club and all Club staff (executive, coaches, managers) prior to registration in NRS, a signed **Concussion Code of Conduct and Review of Concussion Awareness Resource Acknowledgment Form**.

On behalf of the Club name listed above, I verify, as the Club contact, that the club will have proof of age on record for all athletes registered with the OVA prior to competing in an OVA event, but no later than February 1st, 2020.

On behalf of the Club name listed above, I verify, as a duly authorized representative of the Club, that the Club will adhere to all OVA policies and procedures.

Acknowledgment:

On behalf of the Club name listed above, its executives and its members, I verify, as the Club President or duly authorized representative of the Club, that the above statements are true and all aforementioned documentation will be kept on file by the Club throughout the duration of the 2019-2020 season (until August 31, 2020) and made available to the OVA upon request.

Name: _____

Title: _____

Signature: _____ Date: _____

Clubs must submit their completed OVA Club Information Form prior to competing in an OVA sanctioned event. Clubs who fail to submit their Form prior to competing will be subject to a fine and/or forfeit per the below schedule:

Club Form Submission Date	Fine
Within 1 week of competing in 1 st OVA event	\$100.00
Greater than 1 week after competing in 1st OVA event	\$500.00 and/or forfeit of OVA event for all Club teams that participated

Clubs who have not submitted their completed OVA Club Information Form within one week of competing in an OVA event will also be placed in bad standing and will not be eligible to participate in any OVA sanctioned events until their Form has been received by the OVA.

Clubs who submit an OVA Club Information Form with incomplete, invalid, or false information will be placed in bad standing with the OVA and subject to further fines and/or sanctions.



OVA Screening Disclosure Form

CONTACT INFORMATION

NAME:

ADDRESS:

TELEPHONE:

EMAIL:

DATE OF BIRTH:

REQUIRED DISCLOSURE

1. Do you have any criminal convictions for which a pardon has not been granted?

Name/Type of Offence:

Jurisdiction:

Year Convicted:

Penalty or Punishment Imposed:

Further Explanation:

2. Have you ever been charged with a crime?

Name/Type of Offence:

Jurisdiction:

Year Charged:

Penalty or Punishment Imposed (if applicable):

Further Explanation:

3. Are you currently or have you ever been the subject of a criminal investigation or criminal proceedings that has not been resolved?

Name/ Type of Offence or Investigation:

Jurisdiction:

Year Investigation or Proceeding Commenced:

Status of Investigation or Proceeding:

Further Explanation:

4. Do you have any non-criminal convictions under any statute (including offences involving the use of a motor vehicle)?

Name/Type of Offence:

Jurisdiction:

Year Convicted:

Penalty or Punishment Imposed:

Further Explanation:

5. Have you ever been a respondent in a harassment or human rights complaint in any forum?

Jurisdiction:

Year Proceeding Commenced:

Status of Proceeding:

Penalty or Punishment Imposed:

Further Explanation:

6. Have you ever been subject to a penalty imposed by a court, administrative tribunal or regulatory body?

Jurisdiction:

Penalty or Punishment Imposed:

Further Explanation:

7. Have you ever been refused admission to any professional organization or sporting organization?

Name of Organization:

Date Refused Admission:

Reasons Given for Refusal:

Further Explanation:

8. Have you ever faced allegations of misconduct by any professional organization or sporting organization?

Name of Organization:

Date of Allegations:

Nature of Allegations:

Status or Outcome of Investigation/Proceeding:

Penalty or Punishment Imposed (if any):

Further Explanation:

9. Have you ever been suspended, disqualified, censured or otherwise disciplined as a member of any professional organization or sporting organization?

Name of Organization:

Nature of Offence:

Penalty or Punishment Imposed:

Further Explanation:

10. Are there are other matters in your past or present circumstances that may place your character or suitability for OVA positions at issue?

Yes/ No:

Explanation:

IMPORTANT:

FAILURE TO ANSWER THE ABOVE QUESTIONS ACCURATELY AND COMPLETELY MAY RESULT IN THE DENIAL OF YOUR APPLICATION

FAILURE TO CO-OPERATE WITH THE OVA AND SCREENING COMMITTEE MAY RESULT IN THE DENIAL OF YOUR APPLICATION

It is important that you provide the OVA with truthful information and complete explanations (where appropriate) so that the OVA can properly evaluate your application. The OVA Screening Committee may contact you to provide more information in relation to your application. You are expected to fully co-operate with the Screening Committee in the determination of your suitability for a position with the OVA. The Screening Committee has the right to approve an application, reject an application, or approve an application with conditions.

I CERTIFY THAT THE ANSWERS PROVIDED ARE ACCURATE AND COMPLETE

SIGNATURE _____

DATE _____