



SAIL MANITOBA

Application, Screening, and Disclosure Form

LEGAL NAME:

First Middle Last

PREFERRED NAME: _____

CURRENT PERMANENT ADDRESS:

Street City Province Postal

PREFERRED METHOD OF CONTACT: _____

EMERGENCY CONTACT (Relationship) _____ (phone/cell) _____

DATE OF BIRTH: _____ GENDER IDENTITY: _____
Month/Day/Year

CLUB (if applicable): _____ EMAIL: _____
Hereinafter referred to as "member organization"

Note: Failure to disclose truthful information below may be considered an intentional omission and the loss of responsibilities and/ or other privileges

1. Have you been convicted of a crime? If so, please complete the following information for each conviction. Attach additional pages as necessary.

Name or Type of Offense: _____

Name and Jurisdiction of Court/Tribunal: _____

Year Convicted: _____

Penalty or Punishment Imposed: _____

Further Explanation: _____

2. Have you ever been disciplined or sanctioned by a sport governing body or by an independent body (e.g., private tribunal, government agency, etc.) or dismissed from a coaching or volunteer position? If so, please complete the following information for each disciplinary action or sanction. Attach additional pages as necessary.

Name of disciplining or sanctioning body: _____

Date of discipline, sanction, or dismissal: _____

Reasons for discipline, sanction, or dismissal: _____

Penalty or Punishment Imposed: _____

Further Explanation: _____

3. Are criminal charges or any other sanctions, including those from a sport body, private tribunal, or government agency, currently pending or threatened against you? If so, please complete the following information for each pending charge or sanction. Attach additional pages as necessary.

Name or Type of Offense: _____

Name and Jurisdiction of Court/Tribunal: _____

Name of disciplining or sanctioning body: _____

Further Explanation: _____

4. REFERENCES

Please note minors are required to submit four (4) references, adults two (2) references.

Name	Phone/Email	Relationship	Years Known

Consent to Collection and Disclosure

____ I understand that Sail Manitoba and my member organization will be collecting, creating, using, and disclosing my personal information for the purpose of establishing and managing a volunteer relationship.

____ I consent to Sail Manitoba and my member organization doing so, and I also consent to the collection and use of my personal information to ensure the safety of Sail Manitoba and my member organization participants, for statistical purposes, and to inform me about programs or services.

____ By signing this document below, I agree to be subject to and adhere to the policies and procedures of Sail Canada and Sail Manitoba and my member organization including but not limited to the *Code of Conduct*. All policies are located at:

<https://sailmanitoba.com/home/governance>



_____ I recognize that I must pass certain screening requirements depending on the position sought, as outlined in the *Screening Policy*, and that the policy will determine my eligibility to volunteer or work in the position.

PRIVACY STATEMENT

Consent to Collection and Disclosure

_____ I understand by completing and submitting this Screening Disclosure Form, I consent and authorize Sail Canada and Sail Manitoba to collect, use and disclose my personal information, including all information provided on the Screening Disclosure Form as well as my Criminal Record Check and/or Vulnerable Sector Check (when permitted by law) for the purposes of screening, implementation of the *Screening Policy*, administering membership services, and communicating with National Sport Organizations, Provincial Sailing Associations, Clubs, and other organizations involved in the governance of sport. Sail Canada and its Members do not distribute personal information for commercial purposes.

_____ I understand that Sail Manitoba will collect, create, use, and disclose my personal information to establish and manage a volunteer relationship.

_____ I consent Sail Manitoba the use of my personal information to ensure the safety of SAIL MANITOBA participants, for statistical purposes, and to inform me about programs or services.

_____ I consent Sail Manitoba to use or disclose, without payment of any fee, charge, or compensation of any kind, including royalties, any and all non-focused, background, or otherwise unidentifiable photographs, videos, or other visual media (the Image_ of myself taken by Sail Manitoba for promotional purposes.

_____ By signing this document below, I agree to be subject to and adhere to the policies and procedures of Sail Canada and Sail Manitoba, including but not limited to the Code of Conduct.

_____ I recognize that I must pass specific screening requirements depending on the position sought, as outlined in the Screening Policy, and that the policy will determine my eligibility to volunteer or work in the position.

Signature of Applicant: _____

Signature of Parent/Guardian (if applicable): _____

Date: _____

CERTIFICATION

I hereby certify that the information contained in this Screening Disclosure Form is accurate, correct, truthful and complete.

I further certify that I will immediately inform SAIL MANITOBA of any changes in circumstances that would alter my original responses to this Screening Disclosure Form. Failure to do so may result in the withdrawal of employment and/or volunteer responsibilities or other privileges and/or disciplinary action.

NAME (print): _____

DATE: _____

SIGNATURE: _____