



COMPLIANCE OFFICER DECLARATION FORM for COACH COMPLIANCE & VALIDATIONS

I hereby declare that I have verified all club coaches required documents for validity and compliance. I understand and agree to abide by Coach Compliance requirements and to keep the information current and confidential throughout the season.

Club Name:

Club Code:

Compliance Officer Name:

Compliance Officers email:

Compliance Officers phone:

Compliance Officer signature:

Date signed: dd-mmm-yyyy

Authorized by:

Club Presidents Name:

Club Presidents Signature:

Date signed: dd-mmm-yyyy

Should you have any questions, please contact: swim@sportmanitoba.ca