

United Youth Football and Cheer, Inc.

Conference / Association Name: Peninsula Youth Football and Cheer Organization (PYFCO) / Hampton Roads Hokies

BACKGROUND CHECK AFFIDAVIT

As an officer of the Conference listed below, I hereby swear and attest that our conference has established a background check screening/evaluation process and I have verified our member Associations have complied with all aspects and intent, of the Background Check rules and regulations contained in the United Youth Football and Cheer, Inc. (UYFL) National Rulebook, current edition, and have verified that the confidentiality of ALL Volunteer information is being maintained. I understand that falsification of the above statement and/or failure to comply with these requirements may result in the suspension and/or revocation of the Conference membership and/or my dismissal from the organization.

As an officer of the Association listed below, I hereby swear and attest that I have complied with all aspects and intent, of the Background Check rules and regulations contained in the United Youth Football and Cheer, Inc. (UYFL) National Rulebook, current edition. Every coach and volunteer in my Association, who has contact with our minor participant members, has passed our background check evaluation/screening and our Association has conducted all of its required background check screenings per the requirements and in the manner established by our Association/Conference. Furthermore, I hereby swear and attest that I have maintained the confidentiality of all applicant information obtained in the coach/volunteer screening process, including but not limited to state sex offender registry, drivers license and criminal information, by using this information for the sole purpose of conducting background check/screenings for the current football/cheer season.

Conference Name: Peninsula Youth Football and Cheer Organization (PYFCO)

(Conference Authorized Rep.) Print Name (Conference Authorized Rep.) Signature ____/____/____
Date

Association Name: Hampton Roads Hokies

Derrick R. Wright *Derrick R Wright* 09 / 06 / 24
(Association Authorized Rep.) Print Name (Association Authorized Rep.) Signature Date

Note: This form as with any and all forms used should be reviewed by your local council for compliance with any state or local statutes. This form should be kept on file for a minimum of 7 years, longer in the event of an injury. Please confer with your local attorney for advice as to the appropriate maintenance and storage term for this and all such forms.