|  |  |
| --- | --- |
| MIHA | Criminal Sexual Conduct**Michigan Interscholastic Horsemanship Association** |

|  |  |
| --- | --- |
| District: |  |

By signing below, I confirm that on (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ I performed *Criminal Sexual Conducts* on all registered coaches, assistant coaches, and adult volunteers for the \_\_\_\_\_\_\_\_\_\_ season.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **School** | **Position** | **Status** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| **Print Name:** |  |
| **Signature:** |  |