

Please note this form must be delivered to Inter Tribal Sports by mail or in person. This form must be received by Inter Tribal Sports no later than two weeks prior to the anticipated start date. All association affidavits should be kept on file with each tribe/organization



Inter Tribal Sports Confirmation of Compliance with Background Check

I,		(Employee/Board Member/Coach/Official/Player/ Other) of wear and attest that I have complied with all aspects of Program Policy 300.1	
Background Check by		ound checks per the requirements. My background check was completed by(Tribe/Organization/Other) on using:	
Furthermore, in accor background check.	rdance with the Policies and Procedure	s of Inter Tribal Sports, Inc. I hereby swear and attest that I have passed the	
and/or revocation of		or failure to comply with these requirements may result in the suspension or status, and/or my dismissal from the organization, as well as subject me	
organization, which report being generated is conditional upon tharmless from liability organization that may the above tribe/organunderstand that, prior	may include a review of sex offender red that may or may not be me), child about the organization receiving no inapproperty the tribes, Inter Tribal Sports, Inc., the provide such information. I also under hization is not obligated to appoint me	ct background check(s) on me as long as I continue to be active with the egistries (some of which contain name only searches which may result in a use and criminal history records. I understand that, if appointed, my position oriate information on my background. I hereby release and agree to hold me board officers, employees and volunteers thereof, or any other person or estand that, regardless of previous appointments, Inter Tribal Sports, Inc., or e as a board member, coach, official, player or volunteer. If appointed, I abject to suspension by the Executive Board and removal by the Board of ciples.	
Email:		Phone:	
Signature:		Date:	
conducting all of the	test that the above individual has comp	blied with all aspects of Program Policy 300.1 Background Check by quirements. I also swear that the above individual has passed their ure of Inter Tribal Sports, Inc.	
Title:	Name:	Signature:	
Title:	Name:	Signature:	
Email:		Date:	
Inter Tribal Sports, In	nc. Use Only:		
-	Name:	Signature:	