



Disclosure Certificate

I, _____, am a member of USA Deaf Sports Federation (USADSF) and/or serve USADSF as _____.

I have read and understand the USADSF Conflict of Interest policy (the Policy). I agree to comply with the Policy. I also understand that USADSF is a charitable organization and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

I have no conflict of interest to report.

I have the following potential or actual conflict of interest to report:

I HEREBY CONFIRM that my responses to the above questions are complete and correct to the best of my information and belief. I agree that if I become aware of any information that might indicate that this disclosure is inaccurate or that I have not complied with this policy, I will notify the Governance Committee immediately.

Signature / Date

Reviewed by Name/Signature/Date