

HOCKEY CANADA RETURN TO PLAY

-	Name of Player		
is able	e to return to play following injuries sustaine	ed on	
-	Date		
Considerations /restrictions with resp	pect to return to play:		
			_
			_
I understand that Ho	ckey is a contact sport and	there is potential	— for
this injury to happen	again.		_
Name of Treating Physician	Signature		
Date:			
This information is strictly confi play. All records will be returne	fidential and will only be used to assisted to the player.	t in the player's safe return	i to

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