



### HOCKEY CANADA RETURN TO PLAY

\_\_\_\_\_  
Name of Player

is able to return to play following injuries sustained on

\_\_\_\_\_  
Date

Considerations /restrictions with respect to return to play:

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\_\_\_\_\_  
Name of Treating Physician

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

***This information is strictly confidential and will only be used to assist in the player's safe return to play. All records will be returned to the player.***

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