



**ALBERTA SOCCER ASSOCIATION**  
**LEAD, GOVERN AND EVOLVE**

11759 Groat Road  
 Edmonton, AB T5M 3K6



# Alberta Soccer Provincial Championships

## Return to Play Form

This form is to be completed and submitted in accordance with the Provincial Competitions Rule Book *Rule 22.1 A player who receives medical attention from an Emergency Medical Technician or Doctor during the competition is deemed an ineligible player until the player has provided to the Alberta Soccer Representative a letter signed by the medical practitioner advising that the player is fit to return to play.*

This form, when **completed and signed by a medical practitioner**, will serve as advice regarding the player's ability to return to play following an assessed or treated injury or potential injury.

Player name \_\_\_\_\_ Parent/Guardian name \_\_\_\_\_  
*(if player under age 18)*

Date of injury \_\_\_\_\_ Date of decision \_\_\_\_\_

Nature of Injury \_\_\_\_\_

The undersigned hereby certifies: I have assessed the above-named player for the above-described injury and made the following decision regarding the player's continued participation in the current Alberta Soccer Provincial Championship:

Player **IS FIT** to return to play

Player **IS NOT fit** to return to play

Medical Practitioner's Name (Print) \_\_\_\_\_

Medical Practitioner's Signature \_\_\_\_\_

Date Signed \_\_\_\_\_

\*Please provide any conditions, restrictions, or considerations with respect to this decision on the back of this form\*