

# FHBC Athlete Injury/Sickness Report

TODAY'S DATE: \_\_\_\_\_  
Month / Day / Year

Athlete full name (print): \_\_\_\_\_

Athlete date of birth: \_\_\_\_\_  
Month / Day / Year

Female  Male

Athlete Program:

Train 2 Train (T2T) U15  
 Train 2 Compete (T2C) U18  
 Learn 2 Win (L2W) U23

Athlete Region:

Southeast  
 Northwest  
 Lower Mainland  
 Interior

Victoria  
 Duncan

If an athlete is prevented from participating in a trial, training, fitness testing or competition due to injury or illness, details must be provided to FHBC as soon as possible. Please complete all sections and send to FHBC in advance of the trial, training, fitness testing or competition.

1. **What kind** of injury or illness did you sustain? Please note the **nature of injury/illness**:

2. **When** did you become injured or ill? Please note the **date or timeframe** of injury/illness:

3. **When** will you be fit to return? Please note your **Return-to-Play** date or estimated timeframe:

Do you have a doctor's note?

- YES  
 NO

Please send this report and any supporting documentation to:

[melody@fieldhockeybc.com](mailto:melody@fieldhockeybc.com) and/or [athleteprograms@fieldhockeybc.com](mailto:athleteprograms@fieldhockeybc.com)