

## **ERROR CORRECTION FORM - TeamSnap Health Check**

Please use this form in the event that you have made an error when submitting your 'Health Check' or if there is a special circumstance for failing the Health Check that still allows participation in hockey. This form should be completed and given to the Head Coach or Manager of your team, who will be responsible for submitting to the appropriate association representative.

Name of Participant: \_\_\_\_\_

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

Time: \_\_\_\_\_

Facility: \_\_\_\_\_

Association: \_\_\_\_\_

Cohort Name: \_\_\_\_\_

Team Name: \_\_\_\_\_

Reason for Correction:

---

---

---

---

---

---

---