

EASA Storm  
Policies and Procedures Manual

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# **E** Edmonton **A** Adaptive **S** Sports **A** Association

## **Statement of Goals**

### **1.1 Overall Goal**

The Edmonton Adaptive Sports Association (EASA) is established to develop and maintain a sledge hockey program for Edmonton and surrounding areas. The sledge hockey program will at all times be

based upon the following principles:

- a) equality of opportunity for all participants regardless of skill level;
- b) to promote the enjoyment of the game by the participants;
- c) the programs offered by EASA and their delivery shall at all times hold the welfare of its participants paramount;
- d) all programs will have as their emphasis the development of sound attitudes of sportsmanship, fair play and teamwork.

## **Statement of Policies**

### **2.1 Membership with Hockey Alberta and Hockey Canada**

#### **2.1.1 Membership in Hockey Alberta**

EASA shall operate as a member of Hockey Alberta and Hockey Canada. In accordance with the bylaw requirements of Hockey Alberta and Hockey Canada, EASA shall:

- (a) conform and comply with the objectives of Hockey Alberta and satisfy the requirements of Hockey Alberta as required;
- (b) unconditionally commit to obey and abide by Hockey Alberta's and Hockey Canada's Constitution, Bylaws and Regulations;
- (c) recognize Hockey Alberta as the governing body in the Province of Alberta subject only to a right of appeal to Hockey Canada;
- (d) work for the betterment of sledge hockey by making recommendations for improvement in rules, training programs, and all aspects of development by way of presentations to the various Hockey Alberta councils and attendance by EASA Executive at Hockey Alberta and Alberta Sledge Hockey League (ASHL) annual meetings.

#### **2.1.2 Governing Hockey Rules**

EASA shall adopt the Official Hockey Rules of Hockey Canada as adopted and amended from time to time by Hockey Canada. EASA shall have the power to institute such additional rules to apply to members of EASA so long as these rules are not less restrictive than the rules of Hockey Alberta and Hockey Canada and these rules would not contravene existing Hockey Alberta, Hockey Canada or Alberta ASHL rules including the Sledge Hockey Rules supplement.

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## **2.2 Team Structure**

EASA Storm teams will have a head coach, assistant coach, trainer and team manager. The coaches and managers will work with the day to day team operations. All organizational matters for EASA will be deferred to the Head Coach and General Manager as appointed by The Board. The positions of coaches, trainers, and managers will be offered by The Board on the basis of a one-year term. These personnel will not receive direct remuneration for their positions however EASA will cover the following costs for coaches, managers and trainers' expenses for:

- flights and accommodations for tournament travel;
- one half of the hotel cost for league games where travel outside of the Edmonton area is required.

EASA Storm will provide opportunities for players to try out for two teams competing in the ASHL in the Intermediate B and C divisions. The player assessments will be conducted during the first few ices times of the season. The coaching staff will assign players to either the B or C team with the final placements made at the discretion of the Head Coach. A player has the right to ask for a rationale for their assignment; however the decision by the coaching staff and Head Coach is final. If a player is under the age of eighteen, or does not have the mental capacity of a typical adult, their parent or guardian may make the request.

## **2.3 Player Guidelines**

Players will pay an annual registration/membership fee of \$450 due at or before the first ice time. A player may contact EASA to arrange a mutually agreeable payment plan if full payment will cause financial hardship. The registration fee includes:

- Practice ice time twice a week
- Insurance with Hockey Alberta
- League ice time
- Player use of practice jerseys, game jerseys, hockey pants, a sledge and sticks (if required)

Non EASA members who wish to participate in practices will pay \$15 per ice time or \$250 for the season. If a participant is not yet insured with Hockey Alberta then the first fee will be \$60 and all subsequent fees will be \$15. Non EASA members are expected to follow the same rules as EASA members during practices. Violations will be subject to that person having their practice privileges revoked.

### **2.3.1 Independence**

The coaching staff will not be responsible for the personal care of the players. Players who require assistance will have to provide their aid or guardian on site at all times.

### **2.3.2 Equipment**

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All players must wear the following protective gear:

- Helmet with cage
- Neck guard
- Shoulder, elbow and shin pads
- Hockey gloves
- Proper footwear to avoid injury

Players will not be able to participate in practices or games without their protective gear.

## 2.3.3 Practice and Game Guidelines

- Players will arrive at least forty five minutes prior to practice time and at least forty five minutes prior to game time
- Players must provide their availability for practices and games through the TeamSnap app at least one week ahead of any event
- A player who is late for a game will be subject to sanctions as decided by the coach.
- A player who does not provide notice that they will miss a game will miss an additional game at the coach's discretion
- If there is an emergent event which changes a player's availability for a game or practice they must contact both the Head Coach and their respective head coach at least two hours prior to the event

## 2.3.4 Dressing Room Policy

All players have a right to access safe, inclusive and equitable dressing room spaces. In this regard, all athletes have the right to utilize a dressing room or appropriate and equivalent dressing areas based on their gender identity and/or gender expression and that meets their individual needs.

Athletes are responsible for asking for assistance and support to the best of their ability from EASA if they believe they are experiencing or have experienced discrimination based on their gender identity and/or gender expression or when requiring related accommodation.

In the event that an athlete requests such an accommodation, they agree to work cooperatively with EASA to locate appropriate and equivalent dressing areas when faced with facility limitations.

## 2.3.5 Injury Management

If an injury occurs the Team Trainer will complete a Hockey Canada Injury Report form (appendix e). Proper recovery is the most important factor to prevent lengthening the recovery time, aggravating the injury, or causing long term harm. As per Hockey Alberta a player who wishes to return to play must have a Hockey Canada Return to Play form (appendix f) completed by a doctor before they will be allowed to return to play.

### 2.3.5 Tournaments and Travel

Players are responsible for their own travel to and from practices and league games. Every effort will be made to help players make travel arrangements to out of town games. In order to be eligible to play in tournaments the following conditions must be met:

- The player must participate in fundraising for the organization. This could include volunteering at the annual golf tournament or other organization fundraisers
- If a player was unable to participate in fundraising a \$500 deposit will be accepted prior to the travel date. This fee will be reimbursed subsequent to the player participating in the next fundraising effort.
- Their registration/membership fee must be paid in full
- The player must attend 75% of the practices. Allowances will be made for absences discussed with the head coach and team manager
- EASA will pay for players' travel and team accommodations for out of province tournaments. Players are expected to share a room with other players.
- If an adult player over the age of 18 years old shares a room with another player or coaching staff, the room cost will be covered by EASA. EASA will cover a portion of the cost of the room of an adult player or coaching staff not sharing a room with another player or coaching staff for the entire trip.
- Non-players who wish to stay in a players' or coaches' room must have the consent of all occupants of the room.
- Adult players over the age of 18 years old that are unable to share a room with another player due to special circumstances will discuss the situation with the team manager and complete the Guardian Declaration form. The team manager will bring the special circumstance to The Board for review.
- The cost of the room will be covered by EASA for all players that are under the age of 18 sharing a room with a parent or guardian.
- Minors that choose to share a room with another player instead of sharing a room with a parent or guardian will not have an additional room covered by EASA.
- All players are required to obtain and provide proof of medical insurance for non-sanctioned tournaments
- In the event that the team chooses to enter an out of province tournament and EASA cannot provide full funding for the team, the excess expenses will be shared equally with all players attending.

In the case where a non EASA player submits a written request to the Board to play in a tournament, the guest player will:

- Acknowledge their acceptance of EASA's player expectations set out in the Policies and Procedures Manual by signing the Player's Pledge form.
- Pay for their own travel and accommodations.

## 2.4 Code of Ethics

The following codes of ethics apply to all levels of participation in EASA programs: parents, players, coaches and other team personnel, and members of the Board of Directors. These are minimum standards of behavior which participants are expected to observe.

Violation of the standards by a participant may lead to a review by the EASA Board of Directors for subsequent exoneration, reprimand or expulsion. Every player, coach and member will sign their respective Code of Conduct form in order to participate in EASA activities.

### 2.4.1 Executive Committee and/or Board of Directors Code of Ethics

In relation to Club:

1. Members adhere to EASA policy and seek to change policy through the proper channels of EASA.
2. Members maintain the integrity of EASA at all times, and do not participate in any activity which places EASA in ill repute.
3. Members honor commitments made on behalf of EASA.
4. Members do not divulge to the general public any item which may cause personal embarrassment or humiliation.
5. Members resign from the position immediately should they become unable to fulfill the duties or obligations of the position.

In relation to colleagues (other members):

1. Members do not criticize the sphere of another member except to that member or the President. Criticism or reports to the President shall only be made after the member has been made aware of the nature of the criticism to be leveled.
2. Members do not offer comments, render opinions or decisions, with respect to operations not under their control, when speaking with the general public.
3. With respect to issues arising in the community, members will refer matters to the appropriate Board member in whose sphere of operation the issue falls.
4. Members do not undermine the confidence of the general public in other members.

In relation to Club membership:

1. Members fulfill the duties and obligations of their position to the best of their ability, always serving the best interest of ALL players registered with Club.
2. Members treat the general public with dignity, respect, and are considerate of their circumstances.
3. Members do not use their position for the profit or special treatment of themselves or members of their immediate family.
4. Members do not use their position to influence placement of any player.
5. Members do not use their position to influence the selection of any coach or team official.

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2.4.2 Parents' and Guardians' Code of Ethics

1. There can be only one coach on the team, and that person is assigned by EASA. DO NOT attempt to be the invisible coach for your son/daughter. Doing so will only confuse your child, and this confusion will result in frustration for you, the coach and your child.
2. Do be supportive of your child. Praise not just scoreboard success but attitudinal changes, cooperation of teammates, toleration, forgiveness of mistakes, team play, personal skill improvements, and even discipline.
3. You are raising a child, not a sledge hockey player; all of the life skills your children learn in this or any organized activity will help them become a better person.
4. If a dispute between you and team officials or administration occurs, handle the dispute with dignity and through the proper channels. Gossip, infighting, grudges, etc. are not examples of mature behavior to your children and are not useful in achieving a resolution to any dispute.
5. Handle disappointment, whether it occurs through disputes, your child's skill, officials and their decisions, placement on a team, etc. with dignity, maturity and common sense. No one wins all arguments, plays his or her best all the time, or agrees with every decision, but everyone can rise above the pettiness and selfishness.
6. **Playing sledge hockey is a privilege, not a right.** Undesirable conduct or deliberate infractions of rules can result in disciplinary action, which may lead to the revoking of your membership in this organization.
7. Help your child's team, the officials, and the Board of Directors whenever and wherever you are able. Your support and much needed assistance very often means the difference between a rewarding, productive season and a mediocre, frustrating one.
8. No abuse or degradation of any form by our parents will be tolerated. Yelling, screaming or physical abuse is not a solution.
9. As per Hockey Alberta if not already completed in a prior year, one parent or guardian from each family, at their expense, is required to complete the Hockey Alberta Respect in Sport online course prior to December 15th, or your child will be removed from the team. This needs to be renewed every four years.

# E A S A

## Edmonton Adaptive Sports Association

### 2.4.3 Players' Code of Ethics

1. Always strive to give your best. Pride, esteem and respect are just a few of the rewards you can expect from your teammates, fans and coaches if you attempt to be the best you can be.
2. Never belittle or condemn another player, coach or referee. Bad calls, missed passes, short shifts or any of the other frustrations

which occur in organized sports are not valid reasons to hurt or abuse someone else.

3. Do not use foul language. If you can't make your point without swear words, then you should reconsider whether or not you have a point to make.
4. Fighting will result in disciplinary action.
5. Be on time for your games and practices. Both are necessary for you to develop the skills you require to play the game successfully.
6. No abuse or degradation of any form by our players will be tolerated. Yelling, screaming or physical abuse is not a solution.

### 2.4.4 Coaches' Code of Ethics

1. The good coach believes their job is to teach sledge hockey, develop his players, and put a team of participants on the ice for every game. The keys to successful coaching are **LEADERSHIP, COMMUNICATION** and **EXAMPLE**. The coach points out what is right or wrong, fair or unfair. They stress cooperation with authority and respect for it. How they act is more important than what they say. A coach who is fair, who respects authority and the efforts of their players, will have a team that works hard for them.
2. A coach tries to give their team the will to win. They want their players to know the pride of winning as individuals and team members. They must also know how to lose like gracious athletes. A team that plays like this earns friends and respect everywhere it goes and so does the coach.
3. Our coaches must be capable of administering discipline fairly, to the superstar as well as the developing player.
4. Our coaches must be responsible for their own behavior. They are leaders and teachers and their actions reflect upon our total program.
5. Our coaches must be well organized and prepared, both on and off the ice. Our Association works very hard to provide funding for practice and game ice. Coaches do not have the right to misuse or abuse it.
6. No abuse or degradation of any form by our coaches will be tolerated. Yelling, screaming or physical abuse is not a solution.
7. A coach or team official that is reported to be impaired by alcohol or drugs while in his official capacity with the team will be suspended for a minimum of the remainder of the sledge hockey season.
8. **REMEMBER**, coaching is a privilege, not a right. Treat the position and responsibilities with respect.



## **2.5 Discipline and Conduct**

### 2.5.1 Discipline by EASA

The Board shall elect a Disciplinary Chairperson before the start of the sledge hockey season for the purposes of determining disciplinary matters. The Discipline Chairperson will establish a Discipline Committee which will have the powers to suspend, expel and/or impose sanctions and conditions of participation on any Club Member, parent, player or team official who fails to comply with the policies, Bylaws and/or regulations of EASA, Hockey Alberta or Hockey Canada or whose conduct shall be deemed to be improper or unbecoming of a Member, parent, player or team official of EASA. All disciplinary matters relating to activities of on-ice game officials acting in their capacity as on-ice game officials shall be administered by the Officials Association of the applicable zone and/or Hockey Alberta.

### 2.5.2 Disciplinary Process

#### Discipline by a Coach

Coaches of EASA shall be entitled to suspend summarily any player on their respective team for individual discipline problems. Any suspension by a coach may be appealed to the Discipline Committee.

The Discipline Committee will proceed with the disciplinary process after a written report is prepared by the complainant. This written report must be received within seven (7) days of the incident by the General Manager and the Disciplinary Chairperson. Upon receipt of the written report a member is suspended until a hearing is held.

The Discipline Committee will be made up of the Disciplinary Chairperson and two other Board Members. The Discipline Committee shall establish the manner in which it will review and investigate the reported incident on a case by case basis, provided that in no instance shall any person be sanctioned without the opportunity to understand the allegations being made against such person and the opportunity to respond to those allegations.

Following its review and investigation the Discipline Committee shall notify any individual receiving sanctions of such sanctions including suspension and/or conditions of participation in writing. Any suspension imposed by the Discipline Committee shall, upon the Discipline Committee giving notice thereof, take effect immediately and result in the suspended person's suspension from participation in all games or activities to which the suspension applies during the term of such suspension. Automatic suspensions imposed by the constitution, bylaws, regulations or rules of Hockey Canada, Hockey Alberta, or ASHL shall take effect in accordance with such rules without the requirement of any ruling by the Discipline Committee.

### 2.5.3 Appeals In General

- (a) No appeal operates as a stay of any suspension.
- (b) Any appeal by a player younger than eighteen (18) years of age, or by a player who does not possess typical adult mental capacity, may only be made by that player's parent or legal guardian on behalf of the suspended player.
- (c) The party whose conduct is being appealed shall be notified of any hearing being held to consider his appeal and shall have a right to attend such hearing.

## 2.6 Police and Vulnerable Sector Screening Policy

### 2.6.1 Purpose of the Policy

The screening of certain individuals within the Association is an integral part of creating a safe sporting environment. The purpose of this policy is to identify those individuals that may pose a risk to the rest of the Association. The requirements of Hockey Alberta also mandate that a screening policy be maintained by the Association.

### 2.6.2 Application

The following individuals (referred to as "Specified Individuals") are subject to this policy due to their positions being one of trust or authority:

- Coaches, including both head coaches and assistant coaches
- Trainers
- Any other person that, on a case-by-case basis, the Board deems necessary

The above individuals will be screened by a Police Information Check.

If a Specified Individual fails to participate in this screening process, they are deemed ineligible for the position sought.

A Specified Individual's successful screening is valid for three years from the date of approval by the Board, at which point they must be screened again in accordance with this policy. During these three years, a Specified Individual may change positions any number of times without being screened again.

All records collected under this policy shall remain confidential under control of the Secretary unless otherwise required by law.

### 2.6.3 Screening Process

The Board of Directors is responsible for reviewing checks submitted by Specified Individuals. If the Specified Individual is a Director, they will take no part in the decision of their own screening.

The screening process is conducted as follows:

1. Specified Individuals submit their application to the President. If the President is the Specified Individual, they submit their checks to the Vice President. The Board will then submit the applications on behalf of the individual.
2. The Board will review the check and may take one of three actions:
  - i. Approve the check and allow the individual to take the position,
  - ii. Deny the check and refuse the individual the position, or
  - iii. Approve the check and allow the individual to take the position, subject to any terms and conditions agreed to by the Board.

The Board will then notify the individual of its decision, and if it chooses to deny an individual or impose additional conditions, it shall provide them with written reasons for its decision.

3. If, between screenings under this policy, an approved Specified Individual is later charged with, or convicted of, any offense, they must immediately report this to the Board of Directors, who may then choose to revoke the approval of that individual.

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## 2.6.4 Screening Criteria

In reviewing a check, the Board will consider a satisfactory check to be:

- Confirmation that no criminal record or pending charges exist, or
- That any existing convictions or charges are either not relevant to the Association or are sufficiently minor as to not warrant concern.

If a pardon or stay of proceedings has been granted in relation to an offence, it is deemed not to be relevant to the Association. Otherwise, the following offences shall be considered relevant:

Within 5 years:

- Any serious motor vehicle offence, e.g. impaired driving, dangerous driving, failing to remain at the scene of an accident, etc.
- Illegal possession or trafficking of controlled substances

Within 10 years:

- Any violent offence, including assault
- Any offence where the victim or complainant was a minor.
- Any offence relating to theft or fraud

At any time:

- Any offence considered to be sexual in nature



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## Hockey Alberta Policy and Procedure Manual

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**POLICY:** CO ED DRESSING ROOMS  
**DATE ISSUED:** February 28, 2005  
**UPDATED:**  
**SECTION:** Membership Services  
**NUMBER:** HP7

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1. From Atom and down, mixed genders may change in the same room at the same time with the presence of two adults.
2. Players Pee-Wee and higher, mixed genders may not change in the same room at the same time.
3. It is the responsibility of the coach to ensure all are involved in both the pre-game and post game activities.
4. When separate facilities exist for both male and female participants, males and females shall make use of these separate facilities.
5. If the facility does not have separate changing areas available, players shall address the issue by dressing, undressing, and showering in shifts. It is the responsibility of the team to provide a plan that will ensure the safety and privacy of individual players when they are dressing, undressing and showering.
6. An individual team must keep a written record of any relaxation of or deviation from this policy.
7. It is recommended that every Minor Hockey Association adopt this policy.

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**PLAYERS PLEDGE**

*It is the intention of this pledge to promote proper behaviour and respect for all participants within the Association. All players must sign this pledge before being allowed to participate in sledge hockey and must continue to observe the principles of fair play.*

**CODE OF CONDUCT FOR PLAYERS**

- 1. I will play sledge hockey because I want to, not because others or coaches want me to.*
  - 2. I will play by the rules of sledge hockey and in the spirit of the Game.*
  - 3. I will control my temper; fighting or "mouthing-off" can spoil the activity of everyone.*
  - 4. I will respect my opponents.*
  - 5. I will do my best to be a true team player.*
  - 6. I will remember that winning isn't everything and that having fun, improving skills, making friends and doing my best are also important.*
  - 7. I will acknowledge all good plays and performances including those of my team and my opponents.*
  - 8. I will remember that coaches and officials are there to help me. I will accept their decisions and show them respect.*
- 

*I agree to abide by the principles of this CODE as set and supported by this Association.  
I also agree to abide by the rules, regulations and decisions as set for this Association.*

*PRINT*

*NAME* \_\_\_\_\_ *DATE* \_\_\_\_\_

*PLAYER*

*SIGNATURE:* \_\_\_\_\_

**COACHES PLEDGE**

*It is the intention of this pledge to promote proper behaviour and respect for all participants within the Association. All coaches must sign this pledge before being allowed to participate in sledge hockey and must continue to observe the principles of fair play.*

**CODE OF CONDUCT FOR COACHES**

- 1. I will be reasonable when scheduling games and practices remembering that participants have other interests and obligations.*
  - 2. I will teach my athletes to play fairly and to respect the rules, officials, opponents and teammates.*
  - 3. I will ensure all athletes receive equal instruction, discipline, support and appropriate, fair playing time.*
  - 4. I will not ridicule or yell at my athletes for making mistakes or for performing poorly. I will remember that participants play to have fun and must be encouraged to have confidence in themselves.*
  - 5. I will make sure that equipment and facilities are safe and match the athlete's ages and ability.*
  - 6. I will remember that participants need a coach they can respect. I will be generous with praise and set a good example.*
  - 7. I will obtain proper training and continue to upgrade my coaching skills.*
- 

*I agree to abide by the principles of this CODE as set and supported by this Association.  
I also agree to abide by the rules, regulations and decisions as set for this Association.*

*PRINT*

*NAME* \_\_\_\_\_ *DATE* \_\_\_\_\_

*COACH*

*SIGNATURE:* \_\_\_\_\_

Guardian Declaration

The purpose of this document is to establish that a member is functioning at a level which requires a guardian. This is not meant to establish a medical or legal precedent; however it does transfer a specific benefit to the guardian.

Due to the member's incapacity a guardian is required in order to allow them to participate in all of the team's functions. As a result of this the guardian will be granted the benefit of receiving a rooming allowance equivalent to that of a player.

Declaration:

I \_\_\_\_\_ will be acting in the role of guardian for \_\_\_\_\_ due to their inability to act on their own accord. I am solely responsible for \_\_\_\_\_ during team events. If events occur which change the need for this role it is my responsibility to notify EASA. Failure to do this will result in a repayment of any benefits used in error and/or supplementary discipline as determined by the Disciplinary Committee.

Signature: \_\_\_\_\_

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

Approved by The Board of Directors \_\_\_\_\_

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





# HOCKEY CANADA INJURY REPORT



See reverse for mailing address

Forms must be filled out in full or form will be returned. This form must be completed for each case where an injury is sustained by a player, spectator or any other person at a sanctioned hockey activity

CLAIMS MUST BE PRESENTED WITHIN 90 DAYS OF THE INJURY DATE. DATE OF INJURY: \_\_\_/\_\_\_/\_\_\_  
Mo. Day Yr.

**INJURED PARTICIPANT:**  Player  Team Official  Game Official  Spectator

Name: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ Sex:  M  F  
Mo. Day Yr.

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Email Address: \_\_\_\_\_

<b>DIVISION</b> <input type="checkbox"/> Initiation <input type="checkbox"/> Novice <input type="checkbox"/> Atom <input type="checkbox"/> Pee wee <input type="checkbox"/> Bantam <input type="checkbox"/> Midget <input type="checkbox"/> Juvenile <input type="checkbox"/> Junior	<b>CATEGORY</b> <input type="checkbox"/> AAA <input type="checkbox"/> A <input type="checkbox"/> BB <input type="checkbox"/> CC <input type="checkbox"/> DD <input type="checkbox"/> House <input type="checkbox"/> Minor Junior <input type="checkbox"/> Adult Rec. <input type="checkbox"/> AA <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> Major Junior <input type="checkbox"/> Senior <input type="checkbox"/> Other _____
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<b>BODY PART INJURED</b> <table border="1"> <tr> <td><b>Head</b> <input type="checkbox"/> Face <input type="checkbox"/> Skull <input type="checkbox"/> Eye Area <input type="checkbox"/> Throat <input type="checkbox"/> Dental</td> <td><b>Back</b> <input type="checkbox"/> Lower <input type="checkbox"/> Neck <input type="checkbox"/> Upper</td> <td><b>Trunk</b> <input type="checkbox"/> Abdomen <input type="checkbox"/> Ribs <input type="checkbox"/> Chest</td> </tr> <tr> <td><b>Arm:</b> <input type="checkbox"/> Left <input type="checkbox"/> Collarbone <input type="checkbox"/> Right <input type="checkbox"/> Elbow <input type="checkbox"/> Shoulder <input type="checkbox"/> Hand/Finger <input type="checkbox"/> Upper arm <input type="checkbox"/> Forearm/Wrist</td> <td><b>Leg:</b> <input type="checkbox"/> Left <input type="checkbox"/> Knee <input type="checkbox"/> Right <input type="checkbox"/> Toe <input type="checkbox"/> Shin <input type="checkbox"/> Thigh <input type="checkbox"/> Other <input type="checkbox"/> Foot</td> <td><b>Pelvis</b> <input type="checkbox"/> Hip <input type="checkbox"/> Groin</td> </tr> </table>	<b>Head</b> <input type="checkbox"/> Face <input type="checkbox"/> Skull <input type="checkbox"/> Eye Area <input type="checkbox"/> Throat <input type="checkbox"/> Dental	<b>Back</b> <input type="checkbox"/> Lower <input type="checkbox"/> Neck <input type="checkbox"/> Upper	<b>Trunk</b> <input type="checkbox"/> Abdomen <input type="checkbox"/> Ribs <input type="checkbox"/> Chest	<b>Arm:</b> <input type="checkbox"/> Left <input type="checkbox"/> Collarbone <input type="checkbox"/> Right <input type="checkbox"/> Elbow <input type="checkbox"/> Shoulder <input type="checkbox"/> Hand/Finger <input type="checkbox"/> Upper arm <input type="checkbox"/> Forearm/Wrist	<b>Leg:</b> <input type="checkbox"/> Left <input type="checkbox"/> Knee <input type="checkbox"/> Right <input type="checkbox"/> Toe <input type="checkbox"/> Shin <input type="checkbox"/> Thigh <input type="checkbox"/> Other <input type="checkbox"/> Foot	<b>Pelvis</b> <input type="checkbox"/> Hip <input type="checkbox"/> Groin	<b>NATURE OF CONDITION</b> <input type="checkbox"/> Concussion <input type="checkbox"/> Laceration <input type="checkbox"/> Fracture <input type="checkbox"/> Sprain <input type="checkbox"/> Strain <input type="checkbox"/> Contusion <input type="checkbox"/> Dislocation <input type="checkbox"/> Separation <input type="checkbox"/> Internal Organ Injury
<b>Head</b> <input type="checkbox"/> Face <input type="checkbox"/> Skull <input type="checkbox"/> Eye Area <input type="checkbox"/> Throat <input type="checkbox"/> Dental	<b>Back</b> <input type="checkbox"/> Lower <input type="checkbox"/> Neck <input type="checkbox"/> Upper	<b>Trunk</b> <input type="checkbox"/> Abdomen <input type="checkbox"/> Ribs <input type="checkbox"/> Chest					
<b>Arm:</b> <input type="checkbox"/> Left <input type="checkbox"/> Collarbone <input type="checkbox"/> Right <input type="checkbox"/> Elbow <input type="checkbox"/> Shoulder <input type="checkbox"/> Hand/Finger <input type="checkbox"/> Upper arm <input type="checkbox"/> Forearm/Wrist	<b>Leg:</b> <input type="checkbox"/> Left <input type="checkbox"/> Knee <input type="checkbox"/> Right <input type="checkbox"/> Toe <input type="checkbox"/> Shin <input type="checkbox"/> Thigh <input type="checkbox"/> Other <input type="checkbox"/> Foot	<b>Pelvis</b> <input type="checkbox"/> Hip <input type="checkbox"/> Groin					

<b>INJURY CONDITIONS</b> Name of arena/location: _____  <input type="checkbox"/> Exhibition/Regular Season <input type="checkbox"/> Period #2 <input type="checkbox"/> Playoffs/Tournament <input type="checkbox"/> Period #3 <input type="checkbox"/> Practice <input type="checkbox"/> Overtime: ____ <input type="checkbox"/> Try-outs <input type="checkbox"/> Dry Land Training <input type="checkbox"/> Other <input type="checkbox"/> Gradual Onset <input type="checkbox"/> Warm-up <input type="checkbox"/> Other Sport <input type="checkbox"/> Period #1 <input type="checkbox"/> Other: _____	<b>CAUSE OF INJURY</b> <input type="checkbox"/> Hit by Puck <input type="checkbox"/> Collision with Boards <input type="checkbox"/> Non-Contact Injury <input type="checkbox"/> Hit by Stick <input type="checkbox"/> Collision on Open Ice <input type="checkbox"/> Collision with Opponent <input type="checkbox"/> Fall on Ice <input type="checkbox"/> Checked from Behind <input type="checkbox"/> Collision with Net <input type="checkbox"/> Fight <input type="checkbox"/> Blindsiding	<b>ON-SITE CARE</b> <input type="checkbox"/> On-Site Care Only <input type="checkbox"/> Refused Care <input type="checkbox"/> Sent to Hospital by: <input type="checkbox"/> Ambulance <input type="checkbox"/> Car
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Was the injured player in the correct league and level for their age group?  
 Yes  No

Was this a sanctioned Hockey Canada activity?  
 Yes  No

**LOCATION**

Defensive Zone  Offensive Zone  Neutral Zone  
 Behind the Net  3 ft. from Boards  Spectator Area  
 Parking Lot  Dressing Room  Bench  
 Other: \_\_\_\_\_

**WEARING WHEN INJURED**

Full Face Mask  
 Intra-Oral Mouth Guard  
 Half Face Shield/Visor  
 Throat Protector  
 Helmet/No Face Shield  
 No Helmet/No Face Shield  
 Short Gloves  
 Long Gloves

**ADDITIONAL INFORMATION**

Has the player sustained this injury before?  Yes  No

If "Yes" how long ago \_\_\_\_\_

Was a penalty called as a result of the incident?  Yes  No

Estimated absence from hockey?  
 1 week  1-3 weeks  3+ weeks

**DESCRIBE HOW ACCIDENT HAPPENED**

(Attach page if necessary)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I hereby authorize any Health Care Facility, Physician, Dentist or other person who has attended or examined me/my child, to furnish Hockey Canada any and all information with respect to any illness or injury, medical history, consultation, prescriptions or treatment and copies of all dental, hospital, and medical records. A photo static/electronic copy of this authorization shall be considered as effective and valid as the original.

Signed: \_\_\_\_\_  
 (Parent/Guardian if under 18 years of age)

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

**TEAM INFORMATION**

(To be completed by a Team Official)

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

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

Team Official (Print): \_\_\_\_\_

Team Official Position: \_\_\_\_\_

Signature: \_\_\_\_\_

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

**HEALTH INSURANCE INFORMATION**

**THIS MUST BE FILLED OUT IN FULL OR FORM PROCESSING WILL BE DELAYED**

Occupation:  Employed Full-time  Employed Part-time  
 Unemployed  Full-Time Student

Employer (If minor, list parent's employer): \_\_\_\_\_

1. Do you have provincial health coverage?  Yes  No Province: \_\_\_\_\_

2. Do you have other insurance?  Yes  No  
 (IF "YES", PLEASE SUBMIT CLAIM TO YOUR PRIMARY HEALTH INSURER.)

3. Has a claim been submitted?  Yes  No  
 (IF "YES", PLEASE FORWARD PRIMARY INSURER EXPLANATIONS OF BENEFITS.)

Make Claim Payable To:  Injured Person  Parent  Team  Other: \_\_\_\_\_

Member APPROVAL



# HOCKEY CANADA INJURY REPORT



Participant's name: \_\_\_\_\_

## PHYSICIAN'S STATEMENT

Physician: \_\_\_\_\_ Address: \_\_\_\_\_ Tel: (\_\_\_\_) \_\_\_\_\_

Name of Hospital / Clinic: \_\_\_\_\_ Address: \_\_\_\_\_

Nature of Injury: \_\_\_\_\_ Date of First Attendance: \_\_\_\_\_

\_\_\_\_\_ Claimant will be totally disabled:

\_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_ Is the injury permanent and irrecoverable?  No  Yes

Give the details of injury (degree): \_\_\_\_\_

Prognosis for recovery: \_\_\_\_\_

Did any disease or previous injury contribute to the current injury?  No  Yes (describe): \_\_\_\_\_

Was the claimant hospitalized?  No  Yes (give hospital name, address and date admitted): \_\_\_\_\_

Names and addresses of other physicians or surgeons, if any, who attended claimant: \_\_\_\_\_

I certify that the above information is correct and to the best of my knowledge,

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

## DENTIST STATEMENT

Limits of coverage: \$1,250 per tooth, \$3,000 per accident. Treatment must be completed within 52 weeks of accident. (Effective September 1st, 2018)

UNIQUE NO. SPEC. PATIENT'S OFFICIAL ACCOUNT NO.

Patient		
Last name	Given name	
Address		
City/Town	Province	Postal Code

Dentist
PHONE NO _____

I HEREBY ASSIGN MY BENEFITS PAYABLE FROM THIS CLAIM DIRECTLY TO THE NAMED DENTIST AND AUTHORIZE PAYMENT DIRECTLY TO HIM / HER
SIGNATURE OF SUBSCRIBER

FOR DENTIST USE ONLY – FOR ADDITIONAL INFORMATION, DIAGNOSIS, PROCEDURES OR SPECIAL CONSIDERATION.

DUPLICATE FORM

I UNDERSTAND THAT THE FEES LISTED IN THIS CLAIM MAY NOT BE COVERED BY OR MAY EXCEED MY PLAN BENEFITS. I UNDERSTAND THAT I AM FINANCIALLY RESPONSIBLE TO MY DENTIST FOR THE ENTIRE TREATMENT. I ACKNOWLEDGE THAT THE TOTAL FEE OF \$\_\_\_\_\_ IS ACCURATE AND HAS BEEN CHARGED TO ME FOR THE SERVICES RENDERED. I AUTHORIZE RELEASE OF THE INFORMATION CONTAINED IN THIS CLAIM FORM TO MY INSURING COMPANY/PLAN ADMINISTRATOR.

SIGNATURE OF (PATIENT/GUARDIAN) \_\_\_\_\_ OFFICE VERIFICATION \_\_\_\_\_

DATE OF SERVICE DAY / MO. / YR.	PROCEDURE	INITIAL TOOTH CODE	TOOTH SURFACE	DENTIST'S FEE	LAB CHARGE	TOTAL CHARGE

THIS IS AN ACCURATE STATEMENT OF SERVICES PERFORMED AND THE TOTAL FEE DUE AND PAYABLE & OE. TOTAL FEE SUBMITTED

NOTE: All benefits subject to insurer payor status, provisions of the policy, Hockey Canada sanctioned events.

Mail completed form to: **HOCKEY ALBERTA** 100 College Blvd. Tel: (403) 342-6777  
 Box 5005 amarriott@hockeyalberta.ca  
 Red Deer, AB T4N 5H5 www.hockeyalberta.ca



### 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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of Medical Authority

\_\_\_\_\_  
Type of Medical Authority

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

Signature: \_\_\_\_\_

***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.***

***Note: Hockey Canada recommends that this be completed by a physician, chiropractor, physiotherapist or nurse practitioner for muscular or skeletal injuries (excluding fractures) . Fractures as well as all neurological injuries including spinal injuries and concussions must be signed off by a physician.***

***Disclaimer: Personal information used, disclosed, secured or retained by Hockey Canada will be held solely for the purposes for which we collected it and in accordance with the National Privacy Principles contained in the Personal Information Protection and Electronic Documents Act as well as Hockey Canada's own Privacy Policy.***



**COVID-19 MEMBER AGREEMENT - PLAYERS & COACHING STAFF**

*It is the intention of this agreement to promote the health and safety of all participants within the Association. All members must sign this agreement as participants return to hockey during the COVID-19 pandemic and must continue to follow any new guidelines set by Alberta Health Services, Hockey Alberta, Strathcona County, City of Edmonton and the Edmonton Adaptive Sports Association.*

**AGREEMENT FOR MEMBERS**

- 1. I will complete the Team Snap Health Check on team snap no later than 30 minutes before practice.*
- 2. I will not attend ice time if I have symptoms of COVID-19 and/or if I am NOT CLEARED on Team Snap.*
- 3. I will wash my hands or use hand sanitizer upon entering and exiting the arena.*
- 4. I will wear a PPE (Personal Protective Equipment) such as a mask/face shield/face covering into the arena, into the dressing room and when exiting the dressing room until I am outside.*
- 5. I will wear as much gear as possible to minimize the amount of time it takes to get ready in the dressing room.*
- 6. I will remove my PPE in the dressing room, social distance in the dressing room and abide by the arena limits for dressing room occupancy.*
- 7. I will abide by the time limits allowed in the dressing room before and after practice.*
- 8. I understand that I am participating in a cohort as a member of this Association. The cohort will not exceed 50 members.*

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*I agree to abide by the principles of this AGREEMENT as set and supported by this Association. I also agree to abide by the rules, regulations and decisions as set for this Association.*

*PRINT*  
*NAME* \_\_\_\_\_ *DATE* \_\_\_\_\_

*MEMBER*  
*SIGNATURE:* \_\_\_\_\_

*PARENT/GUARDIAN*  
*SIGNATURE:* \_\_\_\_\_