

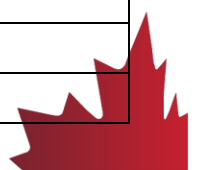
Session Participation and Health Screening Tracking
Singles/Pairs/Dance/Special Olympics

All skaters/coaches are expected to complete Health Screening prior to each participation in on-ice activity. The Health Screening may be completed verbally. By indicating YES in the chart below, you confirm that this Health Screening was passed.

The expectation is that a tracking sheet must exist for each on-ice session to facilitate contact tracing in the event of a COVID-19 exposure.

Session Location	Ice Pad	Date	Time

	Name of each individual included in this session Please list all coaches, choreographers and skaters. <u>Note: Maximum: 25 individuals on the ice</u> <u>Please record all individuals on/off the ice</u>	Contact Phone Number	Health Screening Passed (Yes/No)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			



Session Participation and Health Screening Tracking
Singles/Pairs/Dance/Special Olympics

All skaters/coaches are expected to complete Health Screening prior to each participation in on-ice activity. The Health Screening may be completed verbally. By indicating YES in the chart below, you confirm that this Health Screening was passed.

The expectation is that a tracking sheet must exist for each on-ice session to facilitate contact tracing in the event of a COVID-19 exposure.

Session Location	Ice Pad	Date	Time

	Name of each individual included in this session Please list all coaches, choreographers and skaters. <u>Note: Maximum: 25 individuals on the ice</u> Please record all individuals on/off the ice	Contact Phone Number	Health Screening Passed (Yes/No)
26			
27			
28			
29			
30			

