

DASH Request to Return to Practice due to COVID -19

1. I, _____ am requesting to return to practice starting _____(date)
2. Date COVID - 19 exposure occurred: _____
3. My temperature has been (date and temperature): _____

4. I have had a negative COVID 19 test - please attach copy of test results

This form and test results needs to be submitted to Coach Doug @ coachdoug@teamdash.org

AND Scott Koch @ dashss@teamdash.org