

Station Guide



Athlete Name: _____



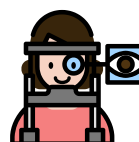
Check in and
answer questions
about my health



Check how my
eyes line up
and work
as a team



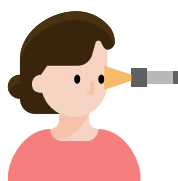
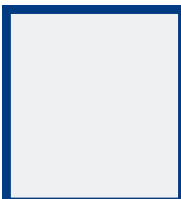
Check if my
glasses are the
right strength for
my eyes



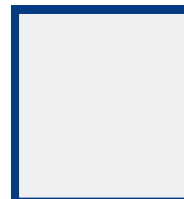
Check the outside
of my eye



Pick the smallest
shapes I can see
far away



Check to see how
my eyes react to
light



Point to the
smallest shapes
that I can see
clearly



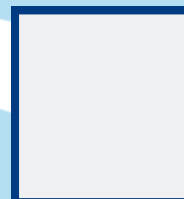
Check the inside
of my eye



Wear special
glasses to test how
well my eyes work
together



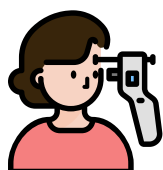
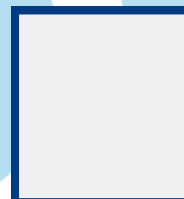
Review my results



Look into a
machine to test if
I may need glasses



Test to see if I
need glasses



Check my eye
pressure



Tell me what I need
to help me see
better

