Register of Attendees

Activity: _____ Location: _____ Date: _____

Arrival Time	Departure Time	Full Name	Phone	Postcode	Email address	Club	Role	**In the previous 14 days, have you:** Had any COVID-19 symptoms? Been in contact with any confirmed/suspected COVID-19 case? Travelled internationally or a COVID declared hotspot?	Have you downloaded and using the COVIDSafe app?