



RETURN TO TRAINING – RECORD OF ATTENDANCE

All trainings must be conducted in accordance with the GUFC Return to Training Guidelines – Level B

Name of Team: _____ Team/Age Group: _____

Week commencing date: _____ Completed by: _____

ALL PERSONS ATTENDING MUST BE RECORDED (INCLUDING COACH, PLAYERS, PARENTS, CARERS, OFFICIALS, SPECTATORS, VOLUNTEERS)

NAME		FFA	COVIDSAFE APP	Arrival Time	Departure Time
First	Surname				
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