



RETURN TO TRAINING/COMPETITION - RECORD OF ATTENDANCE

All Trainings must be conducted in accordance with the Football Victoria Return to Play/Training Conditions

Name of Club:

Team/Age Group:

Week Commencing Date:

Completed by:

NAME		FFA #	ARRIVAL TIME	DEPARTURE TIME	INDOOR SPACES VISITED (eg Toilets/Clubrooms/Changerooms)
First Name	Surname				
1					
2					
3					
4					
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