* Numbers attending practice must comply with restrictions.
* Registers must be kept for every session and made available if required.

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| **CAM/CLUB NAME** |  | | |
| **SESSION DATE** |  | | |
| **SESSION TIME** |  | | |
| **SESSION VENUE** |  | | |
| **COACH NAME** |  | | |
|  | | | |
| **GIVEN NAME** | **SURNAME** | **FIT/WELL?** | **NOTES** |
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