

(COVID-19) BUDOKAN JUDO CLUB TRAINING REGISTER

MONDAY TUESDAY WEDNESDAY THURSDAY SATURDAY

DAY/DATE: _____ JUNIORS SENIORS MONS DINOS

	Arrive Time	Depart Time	Full Name	Email Address	1. In the previous 14 days, have you: <ul style="list-style-type: none"> • had a fever or cough, difficulty breathing, or any flu-like symptoms (runny nose, sore throat, headache) • had, or are you living with anyone who has COVID-19 (Coronavirus)? • been in contact with any confirmed /suspected COVID-19 case? • returned from overseas OR from Victoria? 2. Have you attended any of the reported case locations listed on the NSW Health website (nsw.gov.au/covid-19/latest-news-and-updates).	Have you downloaded and using COVID Safe app? This is encouraged.
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