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| **COVID-19 CONTACT TRACING FORM** |

 | CV19# |
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| Home - Timaru District Council |

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| **PLAYERS AND VISITORS PLEASE SIGN IN TO HELP US WITH CONTACT TRACING.**  |
| For Private Coaching: Parents/guardians accompanying players will also need to sign in. |
| **Court-card/Casual Booking No.** | **DATE** | **TIME** | **COURT NUMBERS** |
|   |   |   |   |
| **CARD HOLDER/CASUAL PLAYER NAME** | **MOBILE NUMBER** | **EMAIL ADDRESS** |
|   |   |   |
|  |  |  |  |  |
| **No.** | **PLAYERS/VISITORS NAME** | **MOBILE NUMBER** | **EMAIL ADDRESS** |
| 1 |   |   |   |
| 2 |   |   |   |
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| This certifies that the above information are true and accurate records. |
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| Card Holder Signature: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ |  |