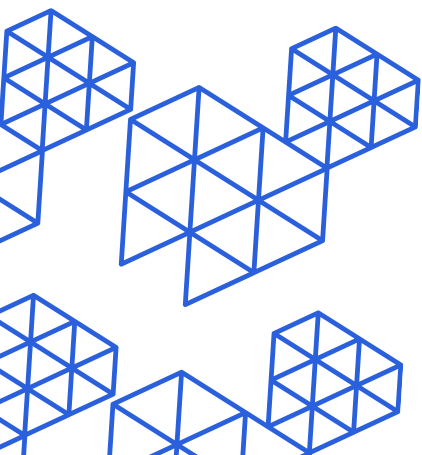


ATTACHMENT 3

OPTIONAL SIGN-IN SHEET





Squad sign-in sheet

Club:			
Date:		Time:	
Coach:		Location:	

By signing this attendance record you certify that:

- You have not returned from overseas travel in the last 14 days.
- You are medically and physically fit and not a danger to yourself or to the health and safety of others.
- You are not experiencing any of the following symptoms – fever, chills or sweats, cough, sore throat, shortness of breath, runny nose, loss of sense of smell.
- While at the venue, participating in club activities, you will ensure you comply with physical distancing and exemplary hygiene measures.
- You acknowledge that you undertake all activities at your own risk and the club and venue (as well as Masters Swimming Australia and Masters Swimming Victoria have NOT and cannot make any representation or warranty that attending the venue or participating in swimming or club activities is free from risk.

In order to comply with Victorian Restricted Activity Directions, your name and contact phone number will be provided to the swimming pool facility operator for contact tracing purposes.

#	PRINT NAME	Signature	Contact telephone	\$ Payment (if applicable)
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