**Team Contact Tracing Template - Players / Coaches / Supporters**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Player / Coach / Supporter’s Name.** | **Contact details.**  **(Include guardians name if applicable)** | **Date of Training or Game** | | |
| 1/6/20 |  |  |
| Ian Rush | Francis Rush – Dad. Cell 555 456 123 | Yes |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Coaches/managers:** **Please send a copy or photo of this document to** [**Hello@upperhuttcityfootball.org.nz**](mailto:Hello@upperhuttcityfootball.org.nz) **at the end of each event for contact tracing. The information will be kept for two months and then deleted.  
  
Email subject line to read - [DDMMYY-GRADE-TEAMNAME-VENUENAME]**