**Please give us your name and a contact number in case you need to be contacted about any cases of Covid-19 reported to us.**

We will store the information securely for the length of time required by the Government.

|  |  |
| --- | --- |
| **Session Name:** | **Session Date:**  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**Please give us your name and a contact number in case you need to be contacted about any cases of Covid-19 reported to us.**

We will store the information securely for the length of time required by the Government.

|  |  |
| --- | --- |
| **Session Name:** | **Session Date:**  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |