

Session Register

Studley Royal Cricket Club

Name of person completing session register:

Date of Session:

Venue of Session:

Times of Session:

Name of qualified coaches attending session:

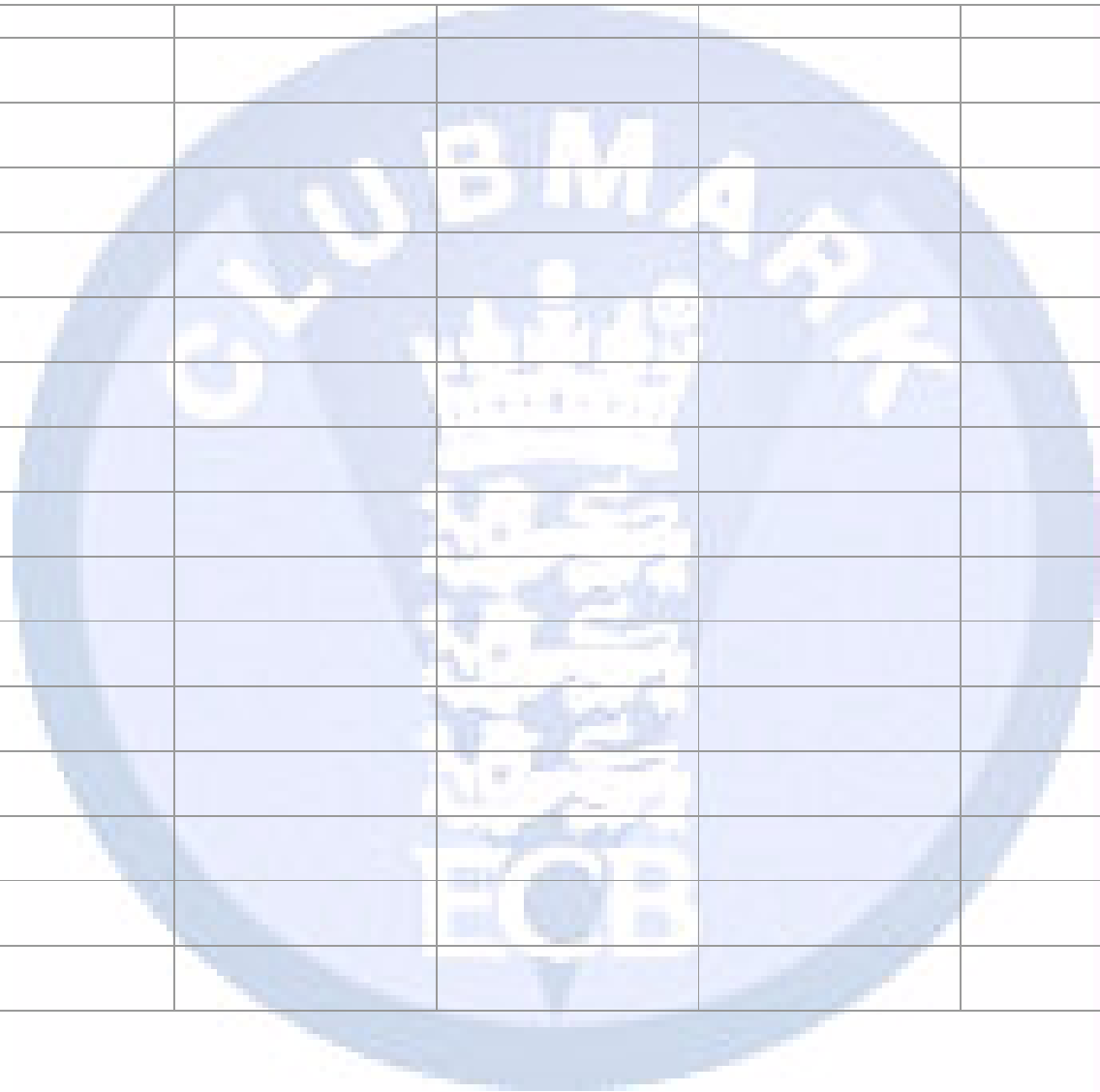
Name of adults supervising session:

1. <input style="width: 90%;" type="text"/> 2. <input style="width: 90%;" type="text"/> 3. <input style="width: 90%;" type="text"/> 4. <input style="width: 90%;" type="text"/> 5. <input style="width: 90%;" type="text"/>

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Participant Details:

Name of Participant	Address	Emergency Contact Tel Number	Date of Birth (DD/MM/YYYY)	Important Medical Information	Attendance ✓	Paid? ✓



Version: January 2007