	Agricultural Societies Council of NSW **Attendance Register**		
	Show Name:		
	Location:		
	Event Type:		**Date/s:**

This document is to be kept by the Show Society, and not be sent back to the ASC or to other relevant organisations unless specifically asked for.

In the previous 14 days, have you:

- **Had any COVID-19 symptoms?**
- **Been in contact with any confirmed/suspected COVID-19 case?**
- **Travelled internationally?**

Full Name	Phone Number	Email address	Is Using the COVID App?