Venue Name:

As per NSW Government Public Health Or Contact Tracing. This information will be c	ders, your personal information is being collected for COVID-19 lestroyed after 56 days.
Name:	
Address:	Postcode:
Email:	Date attended:
Mobile:	Time arrived:
Venue Name:	

As per NSW Government Public Health Orders, your personal information is being collected for COVID-19 Contact Tracing. This information will be destroyed after 56 days.		
Name:		
Address:	Postcode:	
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