

SAFE CHURCH TRAINING

SIGN IN SHEET – PLEASE PRINT *LEGIBLY*

Date:

Location:

Trainer:

	LAST NAME	FIRST NAME	YOUR PARISH NAME	PARISH TOWN	YOUR CONTACT NUMBER	NOTES
1.						
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Date:

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Trainer:

	LAST NAME	FIRST NAME	YOUR PARISH NAME	PARISH TOWN	YOUR CONTACT NUMBER	NOTES
15.						
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Date:

Location:

Trainer:

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