Clarkston Tennis Club

Coaching Attendance Register

DATE:_____/_____/_____ **COACHING SESSION: _____**

PERFORMERS NAME	CB&TC MEMBER	COMPLETED COACHING REGISTRATION FORM	COACHES PRESENT	ADDITIONAL COMMENTS
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		
	❑ Yes ❑ No	❑ Yes ❑ No		