



2023 ACSJ EXTERNAL CCA ATTENDANCE TERM 2

Name:	Class:
Coach Name:	Activity:
Club/Academy/Federation Name & Stamp:	

*Coaches to sign on date of attendance & indicate training duration/competition name.

SUN	MON	TUE	WED	THUR	FRI	SAT
	20/3	21/3	22/3	23/3	24/3	25/3
26/3	27/3	28/3	29/3	30/3	31/3	1/4
2/4	3/4	4/4	5/4	6/4	7/4	8/4
9/4	10/4	11/4	12/4	13/4	14/4	15/4
16/4	17/4	18/4	19/4	20/4	21/4	22/4
23/4	24/4	25/4	26/4	27/4	28/4	29/4
30/4	1/5	2/5	3/5	4/5	5/5	6/5
7/5	8/5	9/5	10/5	11/5	12/5	13/5
14/5	15/5	16/5	17/5	18/5	19/5	20/5
21/5	22/5	23/5	24/5	26/5	26/5	27/5
28/5						

Training Schedule: <small>(Please state day(s) & time)</small>	Sessions Present: _____ Sessions Absent: _____ Total No. of Sessions: _____ Total Hours Attended: _____	Parent/Guardian's Signature:
For Official Use Only: _____ of class _____ have fulfilled/not fulfilled the following criteria: 1) Attended training sessions at least once a week 2) Each training session to last at least 1 hour		Mr Alwyn Tan (Subject Head CCA) Date: _____