CHANNEL MEN'S SHED INC – Daily Log Covid-19 Compliance Period 1-2020					Date	
Shed Coordinator on duty:					**Shed Opening Time:**	**Shed Closing Time:**
Members Name (M) / Visitors Name (V)*	**M / V**	**Time Sign In**	**Time Sign Out**	**Members/Visitors Temperature**	**Duties Agreed**	**Comments**
***Visitors: Please provide contact details in the right hand column of your entry, ie Mob Phone …….**						
Coordinators Comments:						
Daily Hygiene completed:	**Yes/No**			**Comments:**		
Coordinator's Signature:				**Time signed out:**		