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|  | VIEW - Food Safety Record |
| This form should be copied and completed each time the club sells or makes food. |

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| Club Name: |  | Date of Event: |  |
| Type of Event: |  | | |
| Location of Event: |  | | |

Tick this box to indicate that each person who has provided food for this event has been given a copy of their responsibilities and has agreed to follow the guidelines as set out in the VIEW Food Handling Policy

## Register of food items for this event

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| Food prepared | Name of Provider |
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