**Sports Trust Fund**

**Training Schedule**

**Coach/Facilitator**……………………………………………………….. **Sport(s)** …………………………………………………………….

**Number of Participants** …………………………………………….. **Contact Number**……………………………………………..

|  |  |  |  |
| --- | --- | --- | --- |
| **Day** | **Time** | **District** | **Venue** |
| Mon |  |  |  |
| Tue |  |  |  |
| Wed |  |  |  |
| Thu |  |  |  |
| Fri |  |  |  |
| Sat |  |  |  |
| Sun |  |  |  |

**NB: The above template should be filled by the coach/ facilitator and submitted to the sports Trust Fund.**

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