At the end of each term email a copy of completed form to courses@u3apenrith.org.au or deliver it to our office.

 **Class attendance Record 2021 Term No…… Page …….. Of…….**

**Class Title …………………………………………………. Class No…………………**

 **Class Leader……………………………………………….**

**Venue………………………………………………………… Day…………………………. Time ………………….**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **First Name** | **Last Name** | **Member No.** | **Attendance Dates** |
|  |  |  |  |  |  |  |  |  |  |
|  | **Please enter the Total Attendance for each class in this line** |  |  |  |  |  |  |  |  |  |  |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **13** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **14** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **15** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **16** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **17** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **18** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **19** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **20** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **21** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **22** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **23** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **24** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **25** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **26** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **27** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **28** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **29** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **30** |  |  |  |  |  |  |  |  |  |  |  |  |  |