

Regular attendance form

Full name of the child :

Class:

I would like to register my child for the following days and time slots:

Period: from September 15th 2020 to July 15th 2021 (Please tick the boxes for periods of attendance).

Time Slots	Monday	Tuesday	Wednesday	Thursday	Friday
7 :00 - 7 :30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 :30 - 8 :00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 :00 – 12 :00	Cours	Cours	Cours	Cours	Cours
12 :00 – 14 :00	Présence obligatoire	<input type="checkbox"/>	Présence obligatoire	<input type="checkbox"/>	Présence obligatoire
14 :00 – 15 :00	Cours	<input type="checkbox"/>	Cours	<input type="checkbox"/>	Cours
15 :00 – 16 :00	Cours		Cours		Cours
16 :00 – 17 :00	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
17 :00 – 19 :00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

❖ Tick the boxes of the child's presence

NO Presence

Remarks :

Click or tap to enter a date.