

CLASS/GROUP ATTENDANCE SHEET

Term	1	2	3	4	(Please circle)
(Terms a	are aligr	ned with	n schoo	l calend	ar, Queensland state schools
Year					

CLASS/GROUP						
TUTOR NAME			CONT	ACT PHONE		
VENUE			DAY		TIME	
Both Member Nan	ne and current year Receipt No.	1	nitial atte	endance each wee	ek	

Both Member Name and current year Receipt No.				Initial attendance each week									
MUST be recorded				Class Dates (Day and Month) to be recorded in the first row below									
Member Name/ Green Receipt Phone No.			dd/mm	dd/mm	dd/mm	dd/mm	dd/mm	dd/mm	dd/mm	dd/mm	dd/mm	dd/mm	
tick No.		/	/	/	/	/	/	/	/	/	/		
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													

Both Member Name and current year Receipt No. MUST be recorded				Initial attendance each week Class Dates (Day and Month) to be recorded in the first row below									
Member Name / Green Receipt Phone No.			dd/mm	dd/mm				dd/mm			dd/mm	dd/mm	
Tick		No.		1	/	/	/	/	/	/	/	/	/
11													
12													
13													
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