	CLASS REGISTRATION	
Year:	Family Name:	

- Please look at the Co-Op Class Schedule and choose what classes your children would like to take.
- Use another line if you have another choice.

Example

Student's First Name	Gr.	1 st Period	2 nd Period	3rd Period	4th Period	5th Period
Joshua	12	Keyboard	Study Hour	US History	Physics	Physics
		Bible				
Katrina	10	Bible	Keyboard	Middle Ages	Sewing	Money Mgmt.
				US History		

Actual Registration:

Student's		1 st	2 nd Period	3rd	4th	5th
First Name	Gr.	Period	Perioa	Period	Period	Period