

SOPHOMORE PRE-REGISTRATION FORM

DUE TO YOUR TEACHER BY FEBRUARY 12TH

Please indicate which periods you would like scheduled:
1-6_____ 0-5_____ 2-7_____ Other_____

(You must register for at least 6 periods a day)

Current Math Teacher's Signature: _____

Student Signature

Parent/Guardian Signature

Date

Bus transportation* Yes_____ No _____

*To be eligible, you must live 1.5 miles or more from Boise High

PLEASE NOTIFY SCHOOL WITH ANY HOUSEHOLD INFORMATION CHANGES

208-854-4271 OR 208-854-4288