

C.H.E.B.W.A.

Christian Home Educators of the Blue Water Area Registration Form for Membership

Family Name _____

Father's Name: _____ Mother's Name: _____

Mailing Address: _____

Home Phone #: _____ Alternate #: _____

Email Address: _____

What year did you begin homeschooling (for membership card)? _____

Children's Names & Birth dates:

Do you want to receive email updates from CHEBWA? YES NO

Do you want admittance into the private Facebook group? YES NO

If yes, what is your Facebook name? _____

*You will need to accept a friend request from a leader to be added to the group.

Please circle any of the following activities that you are interested in participating in during the 2015-16 member year:

Kid's Parties Exhibitor's Night Hosting a Moms' Night Out Field Day Writing a blog article

Planning a field trip to _____ Sharing a devotional message at a meeting

Speaking at a meeting about: _____

Will you have a high school graduate this year?

Graduate's Name: _____

Do you need a C.H.E.B.W.A. membership card? Yes No

Are there any other events or activities you would like to help with that are not listed?

Sign below if you have you have read and accept the CHEBWA group policies in the membership covenant.

_____ Date _____

Committee Use Only: Dues Included in Directory Email Chain Rec'd Directory FB Group I.D. Card