COVE Homeschooling Association

Family Registration Form

2018 - 2019

Last Name

Date

Early (May 1-May 8)	Family $50 ___	1 child/1 class	$40 ___
Regular Registration	Family $75 ___	1 child/1 class	$40 ___
Winter Registration	Family $35 ___	1 child/1 class	$25 ___
Registration Fee is non-refundable and covers both semesters			
In Lieu of Jobs (semester)	Family $200 ___	1 child/1 class	$100 ___

Cash (exact amount only) / Check # _____

Emergency Form: New ___ Updated: ___

Agreements Form ___ Parent Resource Form ___

Yahoo Groups: Announcements ___ Fellowship ___

Mother: _____ Cell #: _____ Text: Y N

Father: _____ Cell #: _____ Text: Y N

Home #: _____ Primary Email: _____

Street Address: _____

City, ST, Zip _____

Do you have any health issues which would prevent you from performing certain co-op jobs? Yes / No

If yes, please explain _____

_____

Child's Name	Birth date (MM/DD/YYYY)	Gender M / F	Grade in Fall	Allergies/ Health Issues?