

DCHSE Registration
 PO Box 216
 Escanaba, MI 49829

Date Rec'd	Check #	Cash
Registration fee of \$10 is due by September 15, 2007.		
Make check payable to DCHSE.		
Spouse's Name		
E-mail		
Phone		
<input type="radio"/> I would like to be on the "Phone Tree" and receive messages via a telephone call. (Please note that all "Phone Tree" messages will also be sent via e-mail.)		
<input type="radio"/> I would like to receive "Phone Tree" messages via e-mail only		
<input type="radio"/> I am able to receive the newsletter via e-mail		

Name	
Address	
City	
State	Zip Code

Children:	Name	Birth date	Grade

Church affiliation:

Curriculum:

Would you be willing to share information about your curriculum with other parents? Yes No

Are you an HSLDA member? Yes No, but I would like to be No

Group job this year:

Special area of interest/ Topic or speakers you would like at a parent meeting

Would you object to having your child's name or picture printed in the local paper?
 Yes, I would object No, I would not object

Would you object to having your name, address, phone number, children's names and ages printed in a directory for use **only** with our homeschooling leaders?
 Yes, I would object No, I would not object

Do you wish to be listed (parents' names only, address, phone number in the next DCHSE directory for use only within our group? Yes No

Do you have a student planning to graduate in 2008 2009

Your signature acknowledging the following is required for processing this application. Please note that you are not required to agree with the DCHSE Statement of Faith, only to indicate that you have read and understand it. We require this to ensure that you know where we stand as an organization and on what basis our DCHSE Board makes decisions. (Statement can be viewed on website: <http://www.dchse.org/> or can be mailed to you upon request.)

By my signature, I acknowledge I have read and understand the DCHSE Statement of Faith.

X Date: