

## Grace Homeschool Co-op Registration Form 2011-2012

Parents Names: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Do you give permission to be included in a GHC member directory? If yes, check here \_\_\_\_.

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Are you a Grace Church Network member? Y or N (Grace Church of Fredericksburg, Caroline, Winding Creek or Raccoon Ford)

	Student 1	Student 2	Student 3	Student 4
Name				
Age as of Oct. 1				
Class Title # 1				
Class Time				
Tuition	\$	\$	\$	\$
Materials Fee	\$	\$	\$	\$
Check Amount	\$	\$	\$	\$
Check #	#	#	#	#
Class Title # 2				
Class Time				
Tuition	\$	\$	\$	\$
Materials Fee	\$	\$	\$	\$
Check Amount	\$	\$	\$	\$
Check #	#	#	#	#
Class Title #3				
Class Time				
Tuition	\$	\$	\$	\$
Materials Fee	\$	\$	\$	\$
Check Amount	\$	\$	\$	\$
Check#	#	#	#	#
Class Title #4				
Class Time				
Tuition	\$	\$	\$	\$
Materials Fee	\$	\$	\$	\$
Check Amount	\$	\$	\$	\$
Check #	#	#	#	#

### **For Registrar Use Only**

<i>Initials</i>	Contract Signed	Service Hours	Background Check Form	Registration Paid <i>(Pay to Grace Church)</i>	Medical Release Form	Teen Driver Form