

SCHEF 20\_\_ -20\_\_

### MEMBERSHIP APPLICATION

\*\*Parents or Guardians please complete all information as thoroughly as possible\*\*

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

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

Primary Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Primary Email Address: \_\_\_\_\_

\*Email is our primary way of keeping you informed of SCHEF information. \*

Please complete the following for each of your children that you will be homeschooling.

Name/ DOB / Age/ Grade/ Curriculum Used

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

Louisiana residents, which plan will you be using to home educate your children?

Home Study Program \_\_\_\_\_ Private School \_\_\_\_\_ Mississippi Resident \_\_\_\_\_

Are you a member of the Home School Legal Defense Association/HSLDA?

YES \_\_\_\_\_ NO \_\_\_\_\_

If not, are you interested in learning more about HSLDA? YES \_\_\_\_\_ NO \_\_\_\_\_

SCHEF is an all-volunteer organization. Without help from all SCHEF families, SCHEF is unable to thrive. "As each has received a gift, use it to serve one another, as good stewards of God's varied grace." I Peter 4:10

Check at least 1 box indicating an area in which you or your teen (16 or older) would like to volunteer.

Field Trips \_\_\_\_\_ Decades Dances \_\_\_\_\_ Winter formal \_\_\_\_\_ PE \_\_\_\_\_ Yearbook \_\_\_\_\_

Graduation \_\_\_\_\_ Achievement Testing \_\_\_\_\_ Field Day \_\_\_\_\_ Talent Show \_\_\_\_\_

Welcome Back Bash \_\_\_\_\_ Co-op Christmas Party \_\_\_\_\_ Mom's Night Out \_\_\_\_\_

Community Coffee Labels \_\_\_\_\_ Box Tops for Education \_\_\_\_\_ Prom \_\_\_\_\_ Art Gala \_\_\_\_\_

### TERMS OF SERVICE

**My Responsibility** to Register and pay: I understand that it's fully my responsibility to register and Pay (if applicable) for any event or activity that I want to be a part of. I will not be automatically registered for field trips, graduation, or any other SCHEF event or activity.

**Photography Release:** I consent to photographs and videos of our family to be used in newsletters & advertisements to help promote SCHEF and SCHEF events & activities.

**Intent To Homeschool:** I will abide by the State of Louisiana's definition of homeschooling by sending a letter to the registrar as a Nonpublic School (Not Seeking State Approval) in accordance with R.S. 17:232 (C) and (D) or by applying for the BESE

Approved Home Study Program. [Exceptions: Children under 7 are not required to register as Nonpublic School (Not Seeking State Approval) or Approved Home Study students.]

Check here if you have read and agree to the **Terms of Service**

1. We understand that if we choose to enroll our student in LA Connection Academy or a similar K-12 tuition/free online public school at home that we are not eligible to join SCHEF.

Yes, we agree

2. By accepting the Terms and Conditions we confirm we have read and fully agree with SCHEF membership requirements: **SCHEF Constitution and By-Laws** including but not limited to the **Statement of Faith** and **Commitment to Peacekeeping**. If our agreement changes at any point in the future, we understand it is our responsibility to inform SCHEF and resign our membership.

Yes, we agree

3. By accepting the Terms and Conditions we confirm we have read and fully agree with SCHEF membership requirements: **SCHEF OPERATING POLICIES** including but not limited to the **Code of Conduct** and **Dress Code**. If our agreement changes at any point in the future, we understand it is our responsibility to inform SCHEF and resign our membership.

Yes, we agree

We have read and fully agree to the **SCHEF Constitution and By-laws** and the **SCHEF Operating Policies**.

Father Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature required)

Mother Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature required)

Annual dues = \$50.00 for the whole year/ \$25 for ½ a year (January to April)  
(Dues will be used to cover insurance costs as well as provide a working budget for activities)

Total Due \$\_\_\_\_\_

Please make check payable to SCHEF. Mail with your completed application to SCHEF  
P.O. Box 2701  
Slidell, La 70459

\*Application will not be accepted without payment of dues and notarized liability waiver\*  
\*NO EXCEPTIONS!!\*

Applications for membership are subject to approval by Slidell Christian Home Educators Fellowship.