

West Georgia Homeschool Association

Membership Application for 2019-2020

First Name(s) of Parent(s) _____

Last Name of Parent(s) _____

Mailing Address _____

City, State, and Zip Code _____

Home Phone Number _____

Cell Phone Number _____

Email Address _____

Preferred Mode of Communication Home Phone Cell Phone Email Address

Are you a new member or returning member? New Member Returning Member

Church Affiliation _____

Children's Names and Dates of Birth

_____	_____
_____	_____
_____	_____
_____	_____

Please indicate any of the following events that you would like to participate. (Check all that apply.)

- | | |
|---|---|
| <input type="checkbox"/> K5 Graduation | <input type="checkbox"/> Science Fair - high school |
| <input type="checkbox"/> High School Graduation | <input type="checkbox"/> First Fridays at the Park |
| <input type="checkbox"/> Career Day | <input type="checkbox"/> Homeschool Hangout at LaGrange Library |
| <input type="checkbox"/> Science Fair – elementary | <input type="checkbox"/> International Festival |
| <input type="checkbox"/> Science Fair - middle school | <input type="checkbox"/> Teen Group |

Would your family like to serve within the association? Yes No

If yes, what type of service interests you?

Select a payment option for the \$15 membership fee. Payment must be received before the application will be accepted. Cash Check payable to WGHS Google Pay

A copy of the Statement of Faith and Compliance Agreement can be downloaded from the [West Georgia Homeschool Association website](#).

I have read and agree with the above statements and agreements. Any beliefs or conduct not in accordance with these statements and agreements will be considered reason for non-acceptance or dismissal from WGHS.

We agree. We do not agree.

Please contact westgahomeschoolers@gmail.com for the mailing address.