

# CLAYTON AREA HOMESCHOOL GROUP HANDBOOK

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## Mission Statement:

Our mission is to provide affordable, parent-led classes to our children while we encourage the development of a Christ-centered homeschooling community where our children can grow and thrive in the knowledge of Him.

We truly seek to build a homeschool community with one another. We want to enrich the lives of our homeschool families by coming together once a week on Friday afternoons during the school year to do classes together, and we would like to do this at a reasonable cost for all.

# OUR STATEMENT OF FAITH:

Every member must agree to respect the Statement of Faith before joining co-op.

- We believe the Bible to be the inspired word of God. It was written by human authors under the supernatural guidance of the Holy Spirit. Since God is the ultimate authority, His Word is authoritative for Christian beliefs and living.
- We believe that there is one self-existent God who has always been and will always be, manifest in three persons, Father, Son, and Holy Spirit, and that knowing Him truly is the foundation of all knowledge, wisdom, and understanding.
- We believe that Jesus Christ is the Son of God. He is co-equal with the Father. Jesus lived a sinless human life and offered Himself as the perfect sacrifice for the sins of all people by dying on a cross. He rose from the dead after three days to demonstrate His power over sin and death. He ascended to Heaven's glory and will return again someday to earth to reign as King of Kings and Lord of Lords.
- We believe that, through faith and belief in Him, we have received the salvation provided by God's grace through the death of Jesus Christ.
- We believe that children belong to God and we as parents have been given the responsibility and authority for their education and that it is our responsibility to protect this parental right.
- We believe that it is our duty to raise our children in the knowledge of and faith in Jesus Christ and in accordance with His Word.

## What is a Co-op?

Co-op is a true collaborative effort of our members to provide supplementary education opportunities and community for our children. It allows the kids to learn accountability and study skills in a fun group environment and the opportunity to develop friendships. It also provides a community for the parents to fellowship with one another. The co-op will have a mixture of core classes and enrichment classes to choose from which are organized by age/grade. Clayton Area Homeschool Group is not intended to be a replacement for public, private, or Christian schools. Parents are still responsible for their children's education.

## When and Where is Co-op?

Co-op currently meets at Bethesda Baptist Church located at 4967 US HWY 70 Business West, Clayton, NC 27520 on Fridays from 1:00-4:00. The Co-op runs from August through May with several breaks observed throughout the year.

## What does the schedule for the co-op day look like?

**1:00** – Arrival  
**1:15** – Opening Assembly in the Sanctuary  
**1:35 – 2:30** 1<sup>st</sup> Block Classes  
**2:35 – 3:30** 2<sup>nd</sup> Block Classes  
**3:30 – 4:00** Clean up and praise time

## Who can join?

Registration applications are open to all homeschooling families (with at least one child in grade K or older) in and around Johnston County who are willing to uphold the ideals of CAHG, agree to the Code of Conduct, respect our Statement of Faith, and comply with North Carolina's homeschool laws. Potential members must also understand the commitment that they are

signing up for when they choose to join the co-op. **We are not a drop-off program. Every family must have at least 1 parent or guardian on site every week, and that parent or guardian must be participating in a serve position during that time.**

## Commitment:

As a Co-op, we rely 100% on parental involvement. When you sign up and pay the family membership fee, you are making a commitment to teach, help, clean, and/or other roles throughout the school year every Friday.

Every class that we offer is completely parent-led. We cannot offer classes if we do not have parents who volunteer to teach classes. This is also what keeps member and class fees low for everyone instead of paying a large tuition.

Lastly, a lack of commitment results in a heavier workload and possible burden for others. Therefore, every family must be involved within the co-op every week.

## Serve Positions:

This is truly a cooperative effort. Every family will play an important role in the success of this learning venture. **Every family must have a parent or guardian able to serve in at least 2 serve positions.** Serve opportunities include the following positions and more: Teacher, Assistant Teacher, Events Committee member, Care team member, and more.

**In addition to your serve position during co-op hours, each family must volunteer to serve in one of our biannual clean-up days.** We will have 2 clean up days scheduled at the church each year. These will be on a Saturday once a semester. *Every family involved in co-op must serve at least ONE of these Saturdays.* Clean up day will involve activities like thoroughly wiping down tables, chairs, and toys or whatever the church may need at that time by way of cleaning. This will be our community service to the church.

We are blessed to be able to use the church facility every week, and we want to be able to give back in some small way.

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# CO-OP SERVE POSITIONS AND DESCRIPTIONS

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## Board Members:

- President – Sarah Boyle
- Vice President – Aleesha Grimmett
- Secretary/Registrar – Lyssa Barnes

## Committee/Team Leaders (overseen by the Board):

- Event Committee co-Lead – Camile Warren
- Event Committee co-Lead – Hillary Rupert
- Care Team co-Lead – Sarah Scarborough
- Care Team co-Lead – Chelsie Voss
- Bookkeeper – Tiffany Fontan

## Teacher:

- Determine the supplies/equipment needed for their class and report needs to **Aleesha Grimm** for co-op purchases or reimbursement.
- Present brief descriptions of the class to the Board for approval.
- Stay in communication with parents of any needs and assignments through the website.
- Stay in communication with your assistant so they can assist you in your class.
- Ensure all protocols are being adhered to.
- Ensure that your class is picked up after class.
- Notify the Board of any damage to the rooms or furniture.
- Develop a sub-plan for the Assistant to implement in the case of absence.

## Teacher's Assistant:

- Take class attendance each co-op day.
- Be able to back up the teacher when needed and help students in the classroom.
- Be familiar with the class materials.
- Be able to sub in for teacher as needed.
- Assist with maintaining class order.
- Assist with clean-up of class at the end of the period.

## Nursery Lead:

- Determine the supplies/equipment needed for the nursery and report needs to **Aleesha Grimm** for purchase or reimbursement.
- Make sure all security protocols are being adhered to.
- Supervise nursery children and oversee Nursery Helpers.
- Oversee that toys and items used are cleaned and put away after co-op.
- Wipe tabletops with wet wipes before you leave.
- Prepare snacks or milk as needed.
- Change diapers or clothes as needed (provided by the parent).

## Nursery Helper:

- Help Nursery Teacher with children.
- Help to clean and Sanitize toys and equipment used.
- Help to prepare snacks or milk as needed.
- Change diapers or clothes as needed (provided by the parent).
- Wipe tabletops with wet wipes before you leave.

## Student Helpers: (ages 14 and up):

- Teachers have the option to utilize students who volunteer to assist during certain class periods.

## What Costs are Involved in Co-op?

There is a **non-refundable** Family Membership Fee of **\$45** per family due annually before class registrations.

There is also a Student Fee of **\$45 per semester for each student**.

Nursery children do not incur a student fee.

Teachers receive 1 free student per semester.

Adult members must also complete a background check prior to participation in co-op which is \$12.

Administration will send you the link you submit your background check online.

Classes that require a student book that costs more than \$10 will incur a book fee.

Art classes will require a small supply fee due to the expense of art supplies and materials.

Fees will be assessed annually and will be announced prior to registrations each year.

### Fee Schedule

**Family Membership Fee:** \$45 due upon Membership acceptance and annually thereafter before class registration (around April each year).

**Student Fee:** \$45 per student due August 15<sup>th</sup>

\$45 per student due December 15<sup>th</sup>

All fees will be invoiced through our website and will be reflected on your account balance upon logging in.

Contact Sarah Boyle or email [claytonareacoop@gmail.com](mailto:claytonareacoop@gmail.com) with any questions concerning co-op fees.

## How will I know if Co-op is closed due to inclement weather?

We will generally follow Johnston County Public Schools in this area. If JCPS cancels for the day because of inclement weather, co-op will be canceled that day as well. If JCPS operates on a delay (ex. 2 hour delay) because of inclement weather, co-op will still operate on schedule since we do not start until 1:15. If JCPS has an early release because of inclement weather, co-op will be cancelled. Please watch/listen to local news. A phone tree and emails will also be utilized to ensure each member knows what to expect for the day.

## Absences:

We understand that things come up and sometimes, for whatever reason, you may find yourself unable to attend co-op or events may occur that cause you to be late for co-op. Please remember that we are a parent run co-op and we need everyone's participation for co-op to run smoothly.

Because each person's contribution is critical to the success of the whole program, we do have an absence policy. If you have more than 4 absences for the year, your family may be asked to leave co-op. Extenuating circumstances will be considered on a case-by-case basis. For the times when an absence or tardiness is unavoidable, please help us to keep things running as smoothly as possible by alerting the Leadership Team as soon as possible and finding a sub for your position.

### Planned Absences:

In the event that you know ahead of time that you will be absent, please do the following:

- Teachers, communicate with your assistant so that they know what material to lead with in your absence.
- Let **Sarah Boyle** know so she can make a note of it and ensure that we have enough adults in each classroom on the day of your absence.

## Unplanned Absences:

There are going to be times when illnesses and emergencies develop late Thursday night/Friday morning, or one may be running late getting to co-op. If you find yourself in one of these situations, please call or text **Sarah Boyle** (252-267-6864) as soon as possible to let us know that you are either running late or will not be able to make that day's co-op session. A last-minute email may not be seen so please program their number into your contacts.

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# SICK POLICY

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**Family members should not attend any CAHG class or activity if they are contagious with an illness.**

## Members should refrain from coming if they have:

- Flu-like symptoms
- A communicable disease
- Head lice
- Vomiting within 24 hours of the start of the CAHG class or activity
- A fever within 24 hours of the start of the CAHG class or activity

**Children must be fever free for 24 hours PRIOR to participation in any CAHG class or activity. Should you or your child contract a communicable disease and you or your child participated in CAHG during the contagious period, please notify someone from our Leadership Team. If you are unsure if you or your child was contagious, please err on the side of caution and contact the Leadership Team.**

An email will be sent to the CAHG members if it is learned that a contagious child attended a CAHG class or event. We will let members know which communicable diseases their children may have been exposed to as well as a list of the classes or activities in which the infected child was participating. To maintain privacy of the family, no names will be included.

# Clayton Area Homeschool Group's Code of Conduct

We believe it is the parents' responsibility to shape the Godly character of their children and to guide them in their Christian education.

In accordance with that belief, all parents and students are expected to represent themselves in a manner that pleases God.

## We expect parents and children alike to:

1. Be courteous, considerate, cooperative, and respectful.
2. Avoid profanity, gossip, slander, fighting, and bullying.

## Students:

Parents, read this information with your child(ren) and make sure that they understand and abide by the following rules.

Students age 10+ must read this Code of Conduct and sign their agreement on the signatures page (p.13)

1. Be responsive and respectful to those in leadership.
2. Show respect to those around you in words and actions. Avoid unkind words and foul language.
3. Avoid disruption of class to be respectful of your Teacher's time and to avoid distracting the attention of your other classmates. Sit in your seat and listen to instruction from Teachers and Leaders. Refrain from talking when the Teacher is giving instruction and raise your hand when you have a question. Be quiet and courteous when it is someone else's turn to speak.
4. Disruptions and misbehavior will result in being removed from the class to remain with your parent or guardian on site.
5. Your parent will sign an incident report if you must be asked to leave class. Three behavior incidents will result in a mandatory meeting with your parent and the Board of Directors.
6. Continued disruptive behavior will result in either dismissal from the class or CAHG permanently.
7. CAHG is not responsible for the loss of personal objects brought to class. Please avoid bringing things to class that are not required for participation (unnecessary items such as toys, books, stuffed animals, etc.)
8. Cell phones are not allowed to be used in class. Your teacher will take your phone if you have it out during class and will deliver it to your parent on site.
9. No knives or weapons are permitted in class or at events.
10. Violence or threats will not be tolerated and are grounds for immediate dismissal from CAHG.
11. Do not leave a room or activity without the permission of a parent or instructor.
12. Be prepared for class each week with the proper class books or supplies.
13. Clean up after yourself after each class and help with room clean up when appropriate.

## Parents:

You must read this Code of Conduct and sign your agreement on the signatures page (p.13).

1. I understand that my child's education and discipline is my responsibility.
2. I understand that this is a cooperative education venture and that **every family unit must have at least one parent or guardian on site during the entire co-op session who is willing and able to serve in some capacity.** This means that

errands, appointments, etc. should be scheduled outside of Co-op time, and no one should be leaving early nor coming late, as this undermines the functioning of Co-op and shortchanges the other participants. Extenuating circumstances will be considered, but joining Co-op requires a level of commitment that means we do not schedule other appointments or activities for Fridays when co-op is in session.

3. I understand that I will be required to teach or assist in at least 1 class, help in a class when needed, and serve in other capacities as needed. Children will not be registered for co-op unless their parents have made a commitment to help.
4. I understand that I will need to complete a background check to participate in co-op each week.
5. I will take my responsibilities of the group seriously, and I will arrive on time and be as prepared as possible.
6. I understand that my child(ren) will be held to the Student Code of Conduct listed above. If an issue arises, the teacher will speak to the parent. If the issue continues, the teacher will bring the matter before the Board.
7. I understand that I am responsible for my child(ren)'s actions and behavior at all times. Any discipline for behavior issues will be up to me as the parent.
8. I understand that if my child is in a class without myself present and a behavior issue is observed (including but not limited to- continued disruption of class, disrespect to leaders or other classmates), the teacher of the class may give my child a warning. Continued misbehavior will result in the child being sent to me as the parent for discipline. I understand that continued misbehavior can result in my child and/or my family being dismissed from the co-op. After 3 warnings, a meeting with the Board will be held to determine course of action. This meeting will take place prior to the Opening Assembly for the next scheduled co-op day.
9. I will strive to be patient and understanding with everyone's children as well as other parents.
10. If I have an issue with a teacher or another parent, I will communicate it respectfully to that person first, in private. Issues shall not be aired with others. If the issue is not resolved, the adults are to discuss the situation with a member of the Board.
11. I will work together with the other parents so that the group runs smoothly.
12. I will respect the beliefs, opinions, and political affiliations of other members. I understand that parents are to use discretion and try to avoid conversations that may alienate another member or cause a conflict. The topic of politics is not usually conducive to a peaceful atmosphere, and I will refrain from having political discussions.
13. When I enroll my child in a class that requires "homework", I will supervise that work at home. My child(ren) will come to co-op prepared to learn and participate.
14. I will be vigilant about keeping sick germs at home. If my child has had a fever over 100.5 degrees, vomiting, diarrhea, or a contagious illness within the 24 hours up to and including co-op, I will not bring them to Co-op. If they become sick with any of the same during co-op, I will take them home. I will be sure to notify the Administrator so that my classroom responsibilities can be covered.
15. I understand that promptness and attendance is required for the smooth running of the co-op. However, if I am unable to attend, I know that it is my responsibility to alert Sarah Boyle (252)267-6864 as soon as possible. If I am teaching, I understand that I must provide a sub plan for my assistant so that class may continue in my absence.
16. Since Co-op is a cooperative effort and each person's contribution is critical to the success of the whole program, I understand that if I have **more than 4 absences** for the year my family may be asked to leave Co-op and readmission for the following year may be denied. Extenuating circumstances will be considered on a case-by-case basis.
17. If my child has a learning disability or a special need, I will discuss this with each of his/her teachers before co-op begins in an effort to set up my child and the teacher for a successful year.



18. I will do my best to make sure that we go home with all our book bags, lunch boxes, etc. CAHG is not responsible for lost personal belongings.
19. I will refrain from unnecessary use of electronic devices (ex. cell phones) during instructional time.
20. I will check my emails for general co-op updates, and for emails from teachers, understanding that most communication will occur via email.
21. My family will attend **at least one** of the 2 clean up days held each year that will be scheduled at the church as community service one Saturday a semester.
22. I will notify teachers and Administration about any medical conditions, allergies, etc. for each of my children, and I will provide emergency medical information to Administration.

## Please also keep in mind:

1. Being a member of CAHG is a privilege and one's participation can be revoked due to misconduct. The Board may also deny participation to any member at their discretion.
2. The Board reserves the right to dismiss any member for any reason at any time.
3. The Board reserves the right to change policies and procedures to accommodate the needs of the group and will notify all members should such a situation arise.
4. When we are attending activities as a group, our behavior reflects not only on the individuals, but on CAHG as well. We ask that you continue to adhere to these rules of etiquette when we are outside of our normal building the same as when we are in it.

**By joining the Clayton Area Homeschool Group, you agree to abide by this Code of Conduct.**

**Failure to abide by this Code of Conduct will result in permanent dismissal from the group no matter what point of the current school year it may be.**

**If a concern or conflict arises, please bring it to the attention of one of the Board members so that it may be addressed.**

## WAIVER and RELEASE OF LIABILITY [Clayton Area Homeschool Group]

The Clayton Area Homeschool Group (CAHG) is a non-profit organization of Christian families that periodically come together to share educational materials, resources, techniques, field trips, and classes for the benefit of their home-schooled children.

CAHG is a non-commercial educational and social organization that relies 100% on voluntary enrollment and participation. Neither the organizers nor the venue hosts receive compensation for their organizational and planning services. All CAHG activities are pursued in support of the key mission which is to assist the social, spiritual, and academic needs of member's children.

To ensure a proper understanding by parents, guardians, and students of the liability limits of CAHG, its event organizers, its venue hosts, its volunteer parents, its participating students, and the need to conduct such activities without fear of lawsuits or liability in the event of an accident, CAHG requires that all parents, guardians, or other responsible persons read and sign this "Waiver and Release of Liability" (sometimes referred to herein as, the "Release").

I understand that every activity, notwithstanding the best intentions and plans of event organizers and participants, involves some level of risk of accidental bodily injury, death and/or property damage, and sickness due to potential infectious diseases. Notwithstanding such risks and other hazards that may be foreseeable but not specifically identified herein, by my typed signature on this Waiver and Release of Liability, I will waive my legal rights to claim, sue or attempt to hold liable CAHG, its organizers, participants, venue hosts, including their respective families, relatives, heirs, and assignees (the "Released Parties") for any injury, death, communicable diseases, or property damage sustained by me, my children, or anyone in my charge in connection with CAHG events and activities.

I understand and acknowledge that participation in CAHG events are entirely voluntary, that I have enrolled my children or legal charges on my own free will and that, other than a reasonable sharing of associated costs, I am not being charged for events or activities sponsored by CAHG. I agree to participate at my sole liability and expense.

I understand and acknowledge the risks referred to above and do not wish to expose the Released Parties to liability even if they are negligent or commit unintentional wrongful acts. Accordingly, in consideration of an opportunity to participate in CAHG activities and events, I hereby make the following promises in connection with this Waiver and Release of Liability, which I execute as Releasor:

### PROMISES BY RELEASOR:

The undersigned Releasor personally and for their heirs, representatives and assigns, hereby irrevocably releases, acquits and forever discharges the Parties Being Released, their family members and their heirs and estates from any and all claims or demands for any and all loss, injury, death or damage arising out of or related to the undersigned's involvement and/or participation in any CAHG activity or event. This Waiver and Release applies whether damages are caused by the negligence or any other unintentional wrongdoing of the Parties Being Released.

I understand that this Waiver and Release is intended to be a complete release and an irrevocable release of all possible claims for damages caused by negligence or other unintentional wrongdoing. I acknowledge that, under governing laws, a general release may not extend to claims that I, as Releasor, may not know or suspect to exist in my favor at the time of executing this Release that, if known by me, might have materially affected my decision. However, by this complete Waiver and Release of Liability, I understand and acknowledge that I intend that this Release shall encompass not only all known and foreseeable claims but also unknown and unforeseen claims against any of the Parties Being Released arising out of CAHG events and activities.

I understand and acknowledge that by signing this Release I am giving the Parties Being Released a continuous and ongoing release that includes the current, as well as future, events and activities sponsored by CAHG.

I understand and acknowledge that I am an adult of at least 18 years of age. My decision to participate in CAHG events and activities is a voluntary decision and that it has not been coerced in any way. I have been given this document in advance. I am under no pressure to make an immediate decision to participate. I know it is my right to elect not to sign this Release and to refrain from participating in CAHG events and activities.

I understand and hereby acknowledge that by signing this Release I have not only agreed to personally waive any liability claim, but to assume all risk of injury, death or damage suffered during, or as the result of, my decision to participate in a CAHG event or activity. I also agree that by this document, I promise that my heirs, assigns, executor or administrator shall not file any claim or lawsuit against the Parties Being Released, or their heirs, or their estate.

I understand and acknowledge that I may seek advice from legal counsel if I have any doubt before signing this Release. By signing this Release, I acknowledge that either I have sought the advice of legal counsel or wish to now waive the opportunity to talk to a lawyer before signing this Release.

I understand and acknowledge that by signing this Release I am representing that I understand the language used in this Waiver and Release of Liability. I represent that if there is any word or phrase that I did not understand that I have sought the advice of an attorney or other person for an explanation. I represent that in the event of injury, death or property damage, neither me, nor my heirs, nor my representatives shall have a right to claim that I did not understand what I was acknowledging in this Waiver and Release of Liability.

I understand and acknowledge that this Waiver and Release of Liability is a full and complete agreement. No other documents or other information can be used to modify or alter the terms of this Waiver and Release of Liability. This Release is a fully integrated, and complete statement of the Waiver and Release of Liability that I have agreed to. If any provision of this Release is declared invalid, the remaining provisions remain enforceable.

I understand and acknowledge that CAHG is a non-profit organization created to form close friendships and support with other homeschooling families with a vision to work together to meet social and academic needs of participating families.

I agree that regardless of where this document is executed, this Waiver and Release of Liability shall be deemed a private contract entered into in the state of North Carolina. I also agree that regardless of where this document is executed and where an accident might occur, that any occurrence or claim which raises an issue regarding the enforceability of this Release shall be governed by North Carolina law.

I have read and agree to this release of liability:

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date Signed

I have read and agree to the Code of Conduct for both my student and myself, and I agree to respect the Statement of Faith:

Parent Name (Print): \_\_\_\_\_

Parent Signature: \_\_\_\_\_

I have read and agree to the Student Code of Conduct:

Student (age 10+) signature: \_\_\_\_\_

(Additional student 10+): \_\_\_\_\_

(Additional student 10+): \_\_\_\_\_

## FAMILY MEDICAL RELEASE

Parent Name: \_\_\_\_\_

Although it is our mandatory policy that parents remain on site with their children during co-op, it is sometimes possible for children to attend under the supervision of a "substitute" parent or guardian. We need to keep this medical information/release on file for emergency purposes. Please rest assured this info is kept in the strictest confidence.

As parent/guardian of \_\_\_\_\_ (write each child's first name), I authorize the treatment by a qualified and licensed medical practitioner for the above minor child in the event of a medical emergency which, in the opinion of the first responders and / or attending physician, may endanger his/her life, cause disfigurement, physical impairment, or undue discomfort if delayed.

**Are any of your children currently on ANY daily medication that medical services should be aware of?**

Yes \_\_\_ No \_\_\_

If yes, please list child's name and medication:

\_\_\_\_\_  
\_\_\_\_\_

It is the responsibility of the parent/guardian to notify us of any changes to the list of medications.

**Do any of your children have allergies that we or emergency medical services need to be aware of (food, medication, etc.)?**

Yes \_\_\_ No \_\_\_

If yes, please list child's name, allergy, and treatment. This includes allergies to medication (for emergency medical services) and food for co-op.

\_\_\_\_\_  
\_\_\_\_\_

Insurance Information:

\_\_\_\_\_  
\_\_\_\_\_

### Authority to Sign

I represent and warrant that I am a parent or legal guardian of the Child named above and have the full power and authority to enter into this Medical Release on behalf of my Child. By signing below, I acknowledge that I have read and understand this document, and also represent that all information provided is accurate.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Parent Printed Name & Phone Number

\_\_\_\_\_  
Additional Emergency Contact: Name & Phone Number