

# White County Home Educators Membership Request

Family Name: \_\_\_\_\_

Husband's Name: \_\_\_\_\_ Wife's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

County (if not White): \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

CHILDREN:	Name	Birth Year	M/F	Schooling this Year?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

May we include information from the following three questions in our member directory to help others in our group?  Yes  No

What is your home schooling background? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What curriculum are you using this year? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What curriculum have you used in the past that you aren't this year?

\_\_\_\_\_

\_\_\_\_\_

**Information from the following questions will be used to help determine activities or events for WCHE.**

What activities and hobbies does your family like to do to enhance your home schooling experience? \_\_\_\_\_

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What activities would you like to see in WCHE? \_\_\_\_\_

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What activities would you be willing to help with? \_\_\_\_\_

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I have read and agree to abide by the Statements and Standards of the White County Home Educators.

\_\_\_\_\_  
Husband

\_\_\_\_\_  
Wife

Date: \_\_\_\_\_

Please return your completed application, along with \$20 check (made out to WCHE) for membership fees to:

WCHE,  
Lacy Carberry, 12033 S. 500 W, Brookston, IN 47923

Thank you,  
The White County Home Educators Steering Committee