## Christian Home Educators Connection (CHEC) Membership Agreement & Waiver 2023-2024

	NOTE: please print legibly;	use blue or black INK only	,
Parents' Names		1	]
WIFE	HUSBAND	L	LAST NAME
Address:			
City, State:		Zip	
Phones: Primary	1	2nd	(Cell) (Home) (Other)
Email address:	(You cannot be added as a membe	r without an active email addre	
List of Homesci	hooled Children (only) - plea ite for additional steps need	se use back side for any a	dditional children.
Child's First Name	Child's Last Name	Birth date (00/00/00)	Only if high school: Fr - So - Jr - Sr
below. If you are not the custoo	om a child's last name, please co lial parent, please have that child	l's custodial parent fill out a s	•
Non-refundable Membership fees: Please make all checks payable to	<b>\$40 per family</b> , valid 7/1/23-6/30/2	24. Membership fees <b>from 2/1/2</b> ut online membership request, fo	4-5/31/24: \$20, valid until 6/30/24. ound at www.checonnection.com. If
I agree to support CHEC's p	Application urpose and guiding principles and decisions. I agree to the V	Agreement a, and as a member of CHI	EC I agree to abide by CHEC's
Parent's signature Date			
CHEC Waiver of Liability  I understand that I must be present and responsible for supervising my children at all CHEC recreational and educational activities that my children participate in unless I have authorized in writing an alternative CHEC member parent to act on my behalf and to be responsible for supervising my children. CHEC is not responsible for supervising my children. I agree to indemnify and hold harmless the group, CHEC, and all parents that are members of CHEC, from any liability of any acts done by CHEC or its members, that are reasonably related to the particular recreational or educational activity, while participating in the CHEC support group. I hereby consent to participation of my children in CHEC activities and agree to assume all risks involved. I understand that I am responsible for the health/medical care of my children in the event of an injury or accident during any CHEC activity. I understand that the return of a signed Waiver of Liability is necessary for participation in Christian Home Educators Connection (CHEC). I agree that this waiver is valid as long as I am an active member of CHEC.  Parent's signature			
	(do not write below the	is line - office use only)	
□Rec'd □CASH □Check # □ □M. O. # □PayPal			
□PayPal □Entered By: Date Completed:			