

**MACH Member Contract Form**

FAMILY DUES (non-refundable) for 2021-2022 are:

\$350 for current, returning families if paid by April 13, 2021

\$380 if paid April 14—May 31, 2021

\$430 if paid after June 1, 2021

PLEASE INCLUDE PAYMENT WITH THIS FORM. Make a \$325 check payable to East Fairview Church of the Brethren (or you may choose to pay in cash, in the event that there is a delay in processing of the checks). The remaining balance should be made payable to MACH.

IN ADDITION TO PAYMENT, YOU MUST INCLUDE YOUR CURRENT:

•Recognizing and Reporting Child Abuse Certificate of Completion

([https://www.reportabusepa.pitt.edu/webapps/portal/execute/tabs/tabAction?tab\\_tab\\_group\\_id=91\\_1](https://www.reportabusepa.pitt.edu/webapps/portal/execute/tabs/tabAction?tab_tab_group_id=91_1))

•PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE CERTIFICATE (<https://www.compass.state.pa.us/cwis/public/home>)

•PA CRIMINAL RECORD (<https://epatch.state.pa.us/>)

•Disclosure Statement Application For Volunteers (for those who do not need FBI Criminal History Report)

([http://keepkidssafe.pa.gov/cs/groups/webcontent/documents/document/c\\_160267.pdf](http://keepkidssafe.pa.gov/cs/groups/webcontent/documents/document/c_160267.pdf))

•AN FBI CLEARANCE CERTIFICATE (if <10 year PA resident) (<http://www.pa.cogentid.com/index.htm>)

Please sign and return to:

Vicky Goodman

241 Watercress Lane

E-town Pa, 17022

I have read and understand the Statement of Faith, Regulations and Policies, and the Parent Contract, and have reviewed the Student Conduct Contracts with my children. I am committing to 24 weeks of co-op involvement; being present every week, and teaching/helping as needed.

Husband \_\_\_\_\_ Wife \_\_\_\_\_ Date: \_\_\_\_\_

Children Grades 1 to 12

I have read and understand the Student Conduct Contract and Dress code. I agree to behave according to these rules of conduct. I understand that if I fail to comply with these standards, I may lose the privilege of participating in MACH.

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

Names and grades of your children attending MACH (Nursery to grade 12)

~Please include birthdays for children Nursery through Kindergarten.

Do any of your children have any allergies to food or other? Please list. Please convey this to your children’s teachers as well.

Husband and Wife Names:

Mailing address:

Phone Number:

Cell Number:

Email Address:

Office Use: Date \_\_\_\_\_ Amount paid \_\_\_\_\_ Check # \_\_\_\_\_ Or Cash \_\_\_\_\_