

2009-2010

Ebony Homeschoolers

Membership Registration Form

ALL CHECKS SHOULD BE MADE PAYABLE TO MHEA.

Mail the completed form(s) along with appropriate fee(s) to:

EBONY HOMESCHOOLERS
P. O. Box 382131
Germantown, TN 38183-2131

Name: _____

Birthday: Month: _____ / Day: _____

(spouse's name) _____

Address: _____

City/State/Zip Code: _____

Phone Number: _____

Mobile Number: _____ Fax: _____

Email Address: _____

(please print clearly)

+++++Do not write in this section.+++++

_____ invited/responded to loop _____ added to roster
_____ c/cards _____ a-labels _____ TEV-bds
MHEA Y # _____ N _____ statement of understanding c / i
_____ renewed 2009-2010 _____ phone database
_____ c-fone _____ membership fee _____ pending _____

Please list all children. Check those being homeschooled.

Name: _____ boy/girl _____ age/grade _____ DOB _____

Primary curriculum(s) currently using: _____

How long have you homeschooled? _____

Gateway: _____ HomeLife: _____ FaithHeritage: _____

School system: _____ Other: _____

Church affiliation: _____

Do you have any special skills, talents, hobbies, etc. you would be willing to share with the group? _____

Do you have any specific concerns that need to be addressed? _____

Additional comments: _____

Signature: _____ Date: _____

Statement of Understanding

I, _____, understand that if I am to remain a member of Ebony Homeschoolers, I am to regularly attend the monthly meetings. If I am absent 3 consecutive meetings, and fail to contact the leadership either by phone or e-mail, my membership will be made inactive. I further understand that as a member of this group, it is my duty to be a help. I also understand that membership in Ebony Homeschoolers requires me to keep a current membership with MHEA. I understand that I am to act in accordance with the requirements set forth by the state of Tennessee (or Mississippi) regarding homeschooling as well as the expectations of Ebony Homeschoolers as stated in the "Statement of Purpose" and "What We Expect."

Signature: _____ Date: _____

2009-2010 MHEA Membership Application

All memberships/subscriptions expire on July 31 of each year regardless of the month in which they begin. THEA annual dues are included in the prices listed. We offer a discounted rate if you choose to view the newsletter on the internet (paperless). Please select your membership:

\$33 - Membership plus hard copy News & Views \$27 - Membership plus internet News & Views
MHEA Membership No. (if renewing) _____ Widow(er) ____ (If yes, ask about additional MHEA services)

Last name - husband _____ First name - husband _____

Last name - wife _____ First name - wife _____

Address _____ City _____ State _____ Zip _____

County _____ Support Group EBONY HOMESCHOOLERS

Home phone _____ Work phone _____ Mobile phone _____

Email _____ Email _____

Church attending _____

Child's first name, last name, grade ('09-'10), date of birth:

Child's first name, last name, grade ('09-'10), date of birth:

Child's first name, last name, grade ('09-'10), date of birth:

Child's first name, last name, grade ('09-'10), date of birth:

Child's first name, last name, grade ('09-'10), date of birth:

Child's first name, last name, grade ('09-'10), date of birth:



Please check box if you will **NOT** allow MHEA to use the names of your family members in our association's newsletters for the purpose of recognizing the individual's service to MHEA or for winning or placing in a competition sponsored by MHEA. Use back of form for additional children.