

# SCIHE, INC.

## Membership Application for the School Year, July 1<sup>st</sup>- June 30<sup>th</sup>

**Welcome!** Please *sign* and *completely* fill out the information below to the best of your ability. All of the information is needed, both for the membership list, and as a guide in arranging our group activities. Thank you!

I have read, agree to, and signed the statement of faith form and agree to serve in at least one SCIHE function annually: (initial here please) \_\_\_\_\_

I have read and agree that my family will abide by the field trip behavior & conduct expectations (initial here please) \_\_\_\_\_

**School year** (example: 2014-2015) \_\_\_\_\_

Names: first & last \_\_\_\_\_

Husband \_\_\_\_\_

Wife \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: home \_\_\_\_\_ cell \_\_\_\_\_

Best time to call \_\_\_\_\_ email address \_\_\_\_\_

Are you a new member? \_\_\_\_\_

How many years have you been home schooling? \_\_\_\_\_

Names and ages of children who are being home schooled: \_\_\_\_\_

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

Home School Curriculum that you are using: \_\_\_\_\_

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

Do you use any virtual/online curriculum course(s) supported by any public school (ie... K12, Connections Academy) yes/no If so, what do you use? \_\_\_\_\_

**Please mail this application and a signed statement of faith along with \$20 for yearly membership dues to: SCIHE, INC.**

P.O. Box 1394

Columbus, IN 47202-1394

New members joining after January 1<sup>st</sup> need pay only \$10.00.

**Payment, application form, and signed statement of faith must be sent in to activate membership.**