

Roman Catholic Homeschool Association Of Louisiana



P.O. Box 663
Covington, Louisiana 70434



Registration Form ---- Dues \$30.00 for year 2008-2009

Family Last Name: _____

Father: _____ Mother: _____

Street Address: _____

City: _____ State: _____ Zip Code _____

Phone: _____ Include me in the Directory: Yes No

Email Address: _____ in Directory: Yes No

Cell Phone _____ # in the Directory Yes No

Years Homeschooling: _____ (optional)

Curriculum Using: _____ (optional) Church Parish: _____

<u>Children's Name</u>	<u>Birth Date</u>	<u>Grade</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**My signature indicates that I have read, understand and agree to abide by the rules set forth in the Code of Conduct.

PARENT SIGNATURE

For Office Use Only

Amount Paid: _____ Cash _____ Check# _____ Date: _____ Received by: _____