

FOR BOARD USE ONLY

Membership Number _____ Amount Paid _____ Ck# _____ NM _____ RM _____

Input Date _____ Notes: _____



Membership Application and Agreement

Family Name: _____

Father's Name: _____ Mother's Name: _____

Street Address: _____ City: _____ ST: TX

Zip: _____ Telephone: (home) _____ (cell) _____

E-Mail Address: _____

How do you prefer to receive the newsletter? *Circle One* **US Mail** or **E-Mail**

Church Affiliation: _____ # of Years Home Schooled: _____

Past Member of AAHE: (circle one) **Y N** What Year(s)? _____

Children: List all children, give last name if different from yours, indicate if your child is:

Home Schooled (**HS**) Attending public/private school (**PP**) Pre-school age (**PreS**) Graduating Senior (**GS**)

First Name	Last Name (if different)	Email	Age	DOB	Sex	HS	PP	PreS	GS

- **Please List any talents, gifts, skill, education or experiences that might be beneficial to our group.**
By using what God has provided, we will all enjoy ourselves and have a more beneficial experience in AAHE.

Please check at least 1 or more committees you would like to help with this year:

- _____ Sports (Coach, Equipment Mgr., Organizing teams, etc.)
- _____ Activities (Creative Arts Festival, Reading Programs, Fairs, etc.)
- _____ Newsletter (Journalist, Distributor, etc.)
- _____ Resource/Curriculum (Lending Library, Mom's Q&A Night Out, etc.)
- _____ MGM (Monthly Group Meeting - Nursery, Workshops, Set-up/Clean-up etc.)
- _____ Family Events (Parties, Campouts, etc.)

All members are needed and expected to help coordinate our activities during the year. We are a completely parent-run support group which means any activities that are not adequately staffed will be dropped. Please note that some activities will require additional fees (i.e. sports, field trips, campouts, etc.)

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| ♦ Do you want to receive group AAHE messages by email ?
(Be sure to include your email on the front.) <u>Anyone can write to this email group</u> | Y | N |
| ♦ Do you want to receive important AAHE Announcements by email from AAHE Executive Board? (Be sure to include your email on the front.)
<u>Only the board members can write to this email group</u> | Y | N |
| ♦ Do you want your family listed in the AAHE Directory? | Y | N |
| ♦ May we include your address, phone number & email address in the directory? | Y | N |
| ♦ Would you like to advertise your business in the AAHE Directory?
If so, please include \$1.00 with your business card and/or your business name, and phone number. (Deadline September 15th) | Y | N |
| ♦ Are you a member of the Home School Legal Defense Association
or Texas Home School Coalition? (AAHE members receive a group discount) HSLDA THSC Neither
HSLDA ID# _____ (Circle all that apply) | Y | N |
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While it is not required that AAHE members be Christians, it is important for prospective members to understand that the Bylaws and the Activity and Behavior Guidelines for this group, as well as the basis for law in this great nation of ours, are without apology based on the values and precepts derived from the Holy Bible, and any apparent inconsistencies shall be interpreted from that perspective.

Please indicate type of membership applying for:

Full Membership

I am presently home schooling one or more children and we are applying for Full Membership in AAHE. I understand that if I cease to actively home school, our status will automatically revert to an Associate Membership level.

Associate Membership

I am not presently home schooling and we are applying for Associate Membership in AAHE. (Associate members cannot hold an executive office, vote or receive a directory.)

We, the applicants of said family:

1. Agree to abide by all of the Bylaws of the association as a condition of membership.
2. Have read, discussed, and agreed to abide by the Activity and Behavior Guidelines.
3. Recognize the possibility of physical injury associated within any association offering activities to its members, and hereby release, discharge and/or otherwise indemnify AAHE, any of its officers, agents, servants or facilities against any claim by or on our behalf as a result of our participation in AAHE and/or being transported to or from the same, which transportation we hereby authorize.
4. Acknowledge that the parent's or legal guardian's signature below binds the entire family to this agreement.

Printed Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date

All of the following items must be included for your application to be complete:

- Membership Application.
- Cash or Check Payable to Arlington Association of Home Educators.
 - \$25.00 **Early Renewal Rate** (Must renew by May 31st to receive this rate)
 - \$30.00 **First Year Membership or Renewals** (received **after** May 31st)
 - \$15.00 **On or After March 1 of the current year ending in May**
(no spring sports participation)
- Business card and \$1 for advertisement in AAHE Directory, if applicable.

Please send the above items to:

AAHE Membership
PO Box 180905
Arlington, TX 76096-0905

DUES WILL NOT BE REFUNDABLE BECAUSE OF RESIGNATION FROM MEMBERSHIP

Single Parent Fund

Some home school families are less fortunate and AAHE helps with membership dues. If you are able to contribute to the Single Parent Fund, please do so by filling out the sheet below and turning it in with your membership dues.

- Yes, I would like to make a \$_____ donation to the Single Parent Fund.
(All donations are tax deductible)
- I am a single parent that would like to talk about financial help with my membership dues.

Name: _____

Phone: (home)_____ (cell)_____ Best time to call:_____

Address: _____ City: _____ State: TX Zip _____

We send out all tax receipts at the end of the year by request.