

HEA Membership Form 2025-2026

Parents' Names: _____ Phone number: _____

Address: _____

Email address: _____

Child's Name	Age	Grade

The above information will be included in a membership list available to all members. It will not be distributed to any other entity.

Church regularly attended: _____

****HEA Membership** makes any and all HEA activities available to your family (subject to conditions specific to each activity). These include classes, sports, field trips, social activities, book sale, graduation, etc.

****The Membership Form** must be submitted, and fees paid, prior to participating in activities.

****HEA is a parent-run organization.** We are here to support you and we need your support.

Please volunteer to help with at least one activity for the coming school year.

Check the activities you are willing to help with below.

- | | |
|--|---|
| <input type="checkbox"/> Clean up after Coop | <input type="checkbox"/> HEA-AA Admissions/Concessions |
| <input type="checkbox"/> Coop Class Planning Committee | <input type="checkbox"/> Library |
| <input type="checkbox"/> Coop Class Helper | <input type="checkbox"/> Mom's Activities |
| <input type="checkbox"/> Facebook Administrator | <input type="checkbox"/> Parties |
| <input type="checkbox"/> Fall Open House | <input type="checkbox"/> Spring Open House |
| <input type="checkbox"/> Field Trips | <input type="checkbox"/> Teach (current teacher or future interest) |
| <input type="checkbox"/> Graduation | <input type="checkbox"/> Used Book Sale |
| <input type="checkbox"/> Are you willing to be the "lead" on any of the activities you marked, if asked? | <input type="checkbox"/> Webmaster |
| | <input type="checkbox"/> Yearbook Committee |

Please sign the back of this form, and include membership fee of \$60 (payable to HEA).

Mail to: HEA, c/o James Wulf, 4410 SE 24th St., Newton, KS 67114

HEA MEMBERSHIP AGREEMENT

I have read the Membership Guidelines, Statement of Purpose and Faith (see attachment), and the Code of Conduct (see 2nd attachment) and explained them to my children.

I understand that membership is open to home school families who

- 1) are taking full responsibility for 50% or more of the education of their child/ren, whose child/ren are not enrolled in a public or private online school (dual credit/college classes, online or video/dvd based curriculum, or taking supplemental classes at a public high school **do not** constitute enrollment in a public or private online school),
- 2) are in agreement with the HEA statements of purpose, faith, and conduct,
- 3) sign the HEA membership form and pay membership fees.

By my signature, I signify my agreement with the guidelines of HEA and I understand that violation may result in termination of HEA membership and privileges.

Signature: _____ Date: _____

PHOTO RELEASE

Pictures are frequently taken during many of our activities. HEA would like your consent to use these pictures of your child on our website and other publications that will promote our group. We will NOT tag any child's name on any picture. The pictures will be used to express and promote HEA activities. Thank you for your support.

___ Yes, you have my permission to use pictures of my family.

___ No, please do not use pictures of my family.

Signature: _____ Date: _____

This photo release is good for each membership year.