Christian Homeschoolers Assembling Together <u>MEMBERSHIP FORM</u> – School Year 2024-2025

Address		City	Zip
Phone	E-Mail		
Children's Names	M/F	DOB* (mo/day/yr)	Grade (as of Sept. 1st)
	- ————————————————————————————————————		
CHAT strives to create a saftell us any additional infor know. Please list any a epi-pen), or special needs t	mation about you llergies, medical	r children that y needs/equipme	ou feel we shoul
Church:			
If no church, please specify: *Church attendance not requ	ired for membersh	ip.	
How did you hear about CH	AT?		
Do you know any current or	nast CUAT mamb	oma? If was who?	

Family's special interests:	
What additional events, programs, o	or services would fill a need in your
homeschool family?	
**I understand that I must agree to and sig	on the Statement of Egith and Code of Conduct
	gn the Statement of Faith and Code of Conduct epted or denied for any reason based on the evaluation
of the leadership team.**	epted or defined for any reason based on the evaluation
or the leadership team.	
Signature:	Date:

Mail your registration form with 1st choice class fees and a non-refundable \$145.00 fee to the address shown below. Any class fee adjustments will be made on registration night.

Please make checks payable to CHAT. (\$145.00 includes an \$80 annual membership fee, \$5 background check fee, plus the \$60 utility fee. The membership fee and background check are only charged once per school year.

The utility fee is charged each semester of the school year.)

PLEASE NOTE: THERE WILL BE A \$35.00 FEE FOR RETURNED CHECKS

CHAT: Registration PO Box 200212 Cartersville, GA 30120