
Entry Date

Processor's Initials

LIVE STREAM ENROLLMENT FORM
The Homeschool Connection

*Date _____/_____/_____
*For School Year _____ - _____

Office Use Only
Processed Registration Paid
Date: _____

*Student Name (Last, First Middle) _____ *Grade to Enter _____

*Mailing Address (Street, City, State, ZIP) _____ *Parent E-mail Address _____

*Home Phone _____ *Sex _____ *Birth Date _____ *U.S. Citizen (Yes/No) _____

*Father's Name _____ *Father's Cell Phone _____

*Mother's Name _____ *Mother's Cell Phone _____

*Adult financially responsible for the account _____ *Phone _____

*Email Address _____

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STATEMENT OF COOPERATION and WAIVER OF LIABILITY

OFFICE USE ONLY
Date Received: _____

I recognize that attendance at The Homeschool Connection is a privilege and not a right. Parents are expected to cooperate with and support the school and its teachers in the education and discipline of their own child(ren) both in the classroom and during other related school activities. I believe that discipline is necessary for the welfare of each student, as well as for the entire school. I give permission for my child's teacher and/or other agent of the school to make and enforce classroom regulations in a manner consistent with Christian principles. Students shall forfeit the privilege of attending The Homeschool Connection if they do not conform to the standards and way of life at The Homeschool Connection. The Homeschool Connection reserves the right to withdraw a student at any time that the student, in the opinion of and at the sole discretion of The Homeschool Connection, does not conform to the spirit of the school.

I further understand that The Homeschool Connection policy prohibits refunds of registration fees or the first tuition payment.

In the event that a Homeschool Connection photographer or videographer takes a picture with my child in it, either individually or in a group, I give permission for my child's picture to be used in future brochures, videotapes, DVDs or other publications of The Homeschool Connection, LLC.

I give permission for my child, whose name is set forth below, to take part in all activities, including without limitation, sponsored trips away from The Homeschool Connection premises. I indemnify and save The Homeschool Connection, LLC., its affiliates, employees, and agents harmless from and against any claims, demands, causes of action, liability medical payments, costs and attorneys' fees resulting from or arising out of the participation by my child in the above-mentioned activities. I understand that The Homeschool Connection LLC., does not provide medical insurance coverage for my child and that I will be solely and fully responsible for any medical expenses or other liabilities incurred.

I understand that should my marital status change, it is my responsibility to have a corrected Statement of Cooperation and Waiver of Liability signed and updated and delivered to The Homeschool Connection.

This Statement of Cooperation and Waiver of Liability shall remain in effect for as long as my child listed (or others to be enrolled) attends The Homeschool Connection. Any reference herein to "child" shall include and refer to all of the children listed, or others to be enrolled in the future.

List children's names and grades:

Signature of parent:

Date

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