PEACH

Parents Educating At Christian Homes

Family Membership Application

_____New Member **_____$20.00, dues with USPS hard copy newsletter**

_____Returning Member **_____$16.00, dues with electronic newsletter link**

All information included on this form will remain private and will be used by PEACH only.
Returning members - Add $5.00 late fee if received after September PEACH Meeting
Make Checks payable to PEACH and send to Paula Gifford, 1162 June Drive, Xenia, OH 45385

Last Name_____ **Phone**_____

First Name_____ **Father's email**_____
Father Mother

Address_____ **Mother's email**_____
House Number and Street

_____ **Church Home**_____
City State Zip

Children:

Name	Birthdate	Homeschooled under OH homeschool regulations	Enrolled full time in public, private, charter, or e-school?	Homeschool Graduate?	**PEACH member families must homeschool at least one of their children under the Ohio homeschool regulations.** **Nonhomeschooled siblings and graduates will be indicated in the directory.**
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	
		Yes No	**Yes No**	**Yes No**	

This is my 1 2 3 4 5 6 7 8 9 10 11 12+ year home educating .

Please indicate any areas that you would be interested in serving the PEACH membership.

_____Plan a field trip
_____Meeting Set up/take down
_____Science/History Fair
_____Newsletter
_____Coffee and Drinks at Meetings
_____Library
_____Geography Bee
_____Spelling Bee
_____Graduation
_____Curriculum Workshops
_____Care Groups
_____Fall Picnic
_____Mom's Night Out
Other_____

I/We have read and agree with PEACH's statement of faith as written. I/We have read the PEACH bylaws and understand our rights and responsibilities within this organization. *Copies of the statement of faith and bylaws are available at www.peachhomeschool.org or by contacting the PEACH Membership VP or PEACH Secretary.*

_____**Signature** _____**Date**

_____**Signature** _____**Date**