

BCHE REGISTRATION FORM 2009-2010

Please print

Name (Husband and Wife) _____

Address _____

City and Zip _____

Phone(s) _____

How long have you been homeschooling? _____

Do you want to be included on the phone list? **(Support Group Use only)**

Yes _____ No _____

Children's names and birth dates (ex. 01-01-02) _____

PLEASE PRINT:

E-mail address _____

\$10.00 Support Group Fee Amount enclosed: \$ _____

To obtain mailing address send email to: email@bche.org

Office Use Only:

PD	C	A	E	Y	P