



**Columbia Christian Homeschool Co-op (CCHC)**  
**REGISTRATION CONTRACT**

Last Name: \_\_\_\_\_ Mom: \_\_\_\_\_ Dad: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact Person and Phone: \_\_\_\_\_

Names and ages of children registering:

_____	_____
_____	_____
_____	_____

By signing this registration contract, I am stating that I am in agreement with the policies of CCHC as presented in the CCHC Handbook, and the Registration Packet. I have reviewed them with my children, and we agree to abide by the rules and expectations as presently listed, or as may subsequently be amended. I understand that if anyone in my family violates the rules, it will jeopardize our participation in the co-op. I agree to be responsible for the behavior of the children in my charge.

By signing this agreement and submitting my non-refundable registration fee, I establish my family's registration in the Columbia Christian Homeschool Co-op. I understand that I will be required to fulfill the co-op job(s) that will be assigned to me. I understand that failing to comply with these policies will jeopardize my participation in this co-op.

Furthermore, in the case of an accident that results in the injury to my child(ren) or myself, I agree to not hold Columbia Christian Homeschool Co-op, its Board members, or the hosting facility liable for any damages or medical care necessary. I further agree to pay for any item that my children damage or break at the host facility.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Students aged 13 and older:

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_