



First Class Skagit County Membership Application

Due before August 31

Date ____/____/____

Please Circle One: **New Member** **Renewal**

Parents Names: _____

Last

Husband

Wife

Address: _____

City: _____ State ____ Zip _____

Phone: _____ Cell: _____ E-mail address: _____

Emergency Contact: _____ Emergency Phone: _____

To save costs, would you be able/willing to receive our newsletter by email? Yes ____ No ____

Home Church: _____ This is our ____ year homeschooling.

Child's name:	Birthdate	Grade level	M or F	Homeschooled?	
				Y	N
				Y	N
				Y	N
				Y	N
				Y	N
				Y	N

Membership Fees are **\$40** per family per year, renewable August 1st of each year.
For new members joining after January 1, fees are prorated to **\$20** for the remainder of the year.

As a member of First Class Skagit County you are entitled to:

- ♥ Ten newsletters a year
- ♥ Email announcements
- ♥ Email fellowship group
- ♥ Access to all events
- ♥ Membership Directory
- ♥ Support and fellowship!

Please make checks payable to FCSC and mail to:
First Class Skagit County
1500 E. College Way Suite A #303
Mount Vernon, WA 98273

We understand, by submitting this First Class Christian Homeschool Co-op membership form, that our family is participating in co-op activities at our own risk, and therefore we release First Class Christian Homeschool Co-op Skagit County and its Board Members from all liability. We also understand that being a member of our "co-op" means cooperating with the leadership and other members to encourage and support one another in their commitment to homeschool.

Signature _____ Received by _____