



# Homeward Education Association

P.O. Box 7, Sumter SC 29151

Phone: 803-469-4927

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## Application For \_\_\_\_\_ School Year

Circle one: **NEW** or **RENEWAL**

Parent/Guard. Last Name: \_\_\_\_\_ Father Name: \_\_\_\_\_ Mother Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Parents/Guardians Level of Education:  HS Diploma  GED  College  
 (New Applicants need to attach a copy of your diploma or certificate. Also circle for both parents/guardians living in the home)

School District Where You Live: \_\_\_\_\_ Estimated Start Date: \_\_\_\_\_

Names of Student(s) Let us know if special needs	Age	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Step 1: Pick one of these:	One child is being homeschooled	\$40	\$ _____
	<b>OR</b> Two or more children are being homeschooled	\$70	
Step 2: AND pick one of these if it applies to you:	AND One of my children is earning high school credits (even if in 8th grade)	Add \$40	\$ _____
	<b>OR</b> Two or more of my children are earning high school credits (even if in 8th grade)	Add \$60	
Add this after 8/15	Late fee if paying on or after Aug 15th	Add \$10	\$ _____
TOTAL	TOTAL AMOUNT ENCLOSED (non-refundable)		\$ _____

If paying by Debit/Credit Card: Card Number \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ Billing Zip Code \_\_\_\_\_ ccv code \_\_\_\_\_

### NEW APPLICANTS: Please list the curriculum you plan to use on the back of this application.

We agree to follow the minimums as set forth by SC state homeschool law. We agree to fill out and return the compliance form with progress reports at the end of the school year. **We have read the HEA Handbook and accept HEA's policies and procedures.**

Signature of parents/guardians \_\_\_\_\_

Date \_\_\_\_\_

For Office Use Only: Member Number \_\_\_\_\_ Fee Received: \_\_\_\_\_ Check Number: \_\_\_\_\_