

STAR Homeschool Community Family Information 2022-2023

Mother Full Name:	
Mother Cell Number:	
Mother Email:	
Father Full Name:	
Father Cell Number:	
Father Email:	
Home Phone:	
Do both parents want to be on the email list?	
Family Address:	
Children in Family Applying to be in STAR Homeschool Community (Name, Age, Gender, Current Education Method):	Children in Family Not Applying to be in STAR Homeschool Community (Name, Age, Gender, Education plan for next year & Will they be at STAR Homeschool Community with you?):

STAR Homeschool Community Family Information 2022-2023

Emergency Contact:	Phone Number:	Relationship:
--------------------	---------------	---------------

Emergency Contact 2:	Phone Number:	Relationship:
----------------------	---------------	---------------

Do you have any young children whom you would like to be in a nursery or being watched by a paid sitter? (This would be an additional fee). Please explain:

Child(ren)'s Physician:	Phone #
Insurance Company:	Insured:
Policy #:	Group #:

Are there any major medical issues for the parent(s) who will be on site that we should know about in case of an emergency? (Like an allergy that requires an epi pen, etc.)

Church:

Family Experience with Homeschooling/Other Education:

STAR Homeschool Community Family Information 2022-2023

What made you want to sign up for STAR Homeschool Community?

Is there anything else you would like us to know?

- ☐ I have read the Family Handbook and understand the expectations of STAR Homeschool Community.

Parent Signatures

Date
