

HEA CO-OP

Registration Form

"CO-OP IS NOT A DROP OFF OPPORTUNITY ~ PARENTS MUST PARTICIPATE"

Classes are filled on a "first come, first serve" basis!

Instructions:

1. *Fill in all spaces* that are applicable for you and your children. Incomplete applications will be returned, which could determine whether or not you get into certain class choices.
2. When filling out your registration form please fill in your second and third choices for all hours that you will be attending Co-op. ***Do not assume that you will get your first or second choice.*** If you do not fill in your second and third choices, it will be assumed that you want "Board Games/Study Hall" for that hour.
Please Note: ALL students must be assigned to a class for all sessions that they will be in the facility.
3. Bring your registration form and \$50.00 non-refundable registration fee with you to Registration Day. (Registration Day ~ date, time, and location TBA)

In order for your application to be processed, you must be a current member of HEA!

Due with Registration:

\$50.00 non-refundable annual registration fee per family for HEA members. (One time yearly fee)
Make check Payable to HEA.

If you have any questions please contact:

Dionne Mefford ~ Co-op Director
dionnemefford@gmail.com or 985.796.8261

Location: (Please DO NOT call First Baptist Church with any Co-op questions. Contact the Co-op Director.)

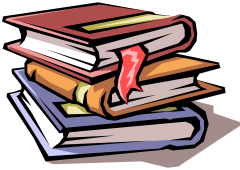
First Baptist Church, Covington

16333 Hwy. 1085 Covington
(Intersection of Highways 21 & 1085, 7/10 mile N. of I-12)

Driving Directions:

Take I-12 West to the Hwy. 21 exit (Target), turn right onto Hwy. 21. Continue North to Hwy. 1085 and turn left. Then turn right on the first street on the side of Walgreens. The church parking lot will be on your left.

Park and enter through the Kids Stuf Theatre. (DO NOT ENTER THROUGH THE CHURCH LOBBY)



HEA CO-OP

85271 Hwy. 25 ~ Franklinton, LA 70438
 985.796.8261 ~ 985.705.0939
 dionnemefford@gmail.com

Family Information ~ One application per family ~ Please print in dark ink

Name: _____
 Last Husband Wife

Address: _____
 Street City State Zip

Phone: () _____ **Cell:** () _____

E-Mail: _____ **HEA Member #** _____

In Case of Emergency: (This is in case of an emergency with the "parent" attending)

Name: _____ **Phone:** () _____

Name: _____ **Phone:** () _____

~THIS IS NOT A DROP OFF OPPORTUNITY. PARENTS MUST PARTICIPATE~

Participating Parents Section

Instructions: Enter your first and second choices for the classes you would prefer to assist in based on your interests and spiritual gifts. Positions fill quickly and it is possible that your first and/or second choices may not be available.

Name: _____

Phone: () _____ **Cell:** () _____

Enter the class you are teaching and/or where you would prefer to assist in co-op

Hour	Teaching	1 st Assisting Choice	2 nd Assisting Choice
1st			
2nd			
3rd			

Please check box if you are willing to assist wherever needed

I WILL ASSIST WHEREVER NEEDED

PLEASE NOTE: ALL PARENTS WILL BE ASSIGNED A DAY FOR SET UP AND CLEAN UP, TWO DAYS FOR SET UP, OR TWO DAYS FOR CLEAN UP, DEPENDING ON WHICH HOURS YOU ATTEND CO-OP.

Student Section

Classes are filled on a "first come, first served" basis.

Please Note: All students, including Infants, Nursery, Pre-K, and Kindergarten – 12th grade, must be assigned to a class for all sessions that they will in the facility. Therefore, you will need to fill out a student section for every child attending Co-op. Please indicate your "second and third choices" or it will be assumed that you want Board Games/Study Hall for that hour.

(Children must be the age indicated on the Class Descriptions by August 1st of the current school year ~ No Exceptions)

Class codes are on the Class Descriptions Page

DO NOT FILL IN CLASS COST

1 st Student's Name				Grade	Age	Birth Date	
Hour	1 st Class Choice <i>Enter Class Code</i>	Need Book	2 nd Class Choice <i>Enter Class Code</i>	Need Book	3 rd Class Choice <i>Enter Class Code</i>	Need Book	Class Cost
1 st		Yes No		Yes No		Yes No	
2 nd		Yes No		Yes No		Yes No	
3 rd		Yes No		Yes No		Yes No	

DO NOT FILL IN CLASS COST

2nd Student's Name				Grade	Age	Birth Date	
Hour	1 st Class Choice <i>Enter Class Code</i>	Need Book	2 nd Class Choice <i>Enter Class Code</i>	Need Book	3 rd Class Choice <i>Enter Class Code</i>	Need Book	Class Cost
1 st		Yes No		Yes No		Yes No	
2 nd		Yes No		Yes No		Yes No	
3 rd		Yes No		Yes No		Yes No	

DO NOT FILL IN CLASS COST

3rd Student's Name				Grade	Age	Birth Date	
Hour	1 st Class Choice <i>Enter Class Code</i>	Need Book	2 nd Class Choice <i>Enter Class Code</i>	Need Book	3 rd Class Choice <i>Enter Class Code</i>	Need Book	Class Cost
1 st		Yes No		Yes No		Yes No	
2 nd		Yes No		Yes No		Yes No	
3 rd		Yes No		Yes No		Yes No	

DO NOT FILL IN CLASS COST

4th Student's Name				Grade	Age	Birth Date	
Hour	1st Class Choice Enter Class Code	Need Book	2nd Class Choice Enter Class Code	Need Book	3rd Class Choice Enter Class Code	Need Book	Class Cost
1st		Yes No		Yes No		Yes No	
2nd		Yes No		Yes No		Yes No	
3rd		Yes No		Yes No		Yes No	

DO NOT FILL IN CLASS COST

5th Student's Name				Grade	Age	Birth Date	
Hour	1st Class Choice Enter Class Code	Need Book	2nd Class Choice Enter Class Code	Need Book	3rd Class Choice Enter Class Code	Need Book	Class Cost
1st		Yes No		Yes No		Yes No	
2nd		Yes No		Yes No		Yes No	
3rd		Yes No		Yes No		Yes No	

DO NOT FILL IN CLASS COST

6th Student's Name				Grade	Age	Birth Date	
Hour	1st Class Choice Enter Class Code	Need Book	2nd Class Choice Enter Class Code	Need Book	3rd Class Choice Enter Class Code	Need Book	Class Cost
1st		Yes No		Yes No		Yes No	
2nd		Yes No		Yes No		Yes No	
3rd		Yes No		Yes No		Yes No	

I have read and agree to HEA's Rules and Guidelines, including the release of liability and indemnification of HEA, it's teachers, members and it's host facility, and their staff.

Sign: _____ Date: _____

****You must be a current member of HEA for this application to be processed****

Due with application: \$50.00 non-refundable annual registration fee per family. The registration fee must be included with your registration application. Checks are to be made payable to HEA. Class fees are due at orientation. Registration may close before the deadline if we have reached our facility's maximum capacity. Co-op classes are held at First Baptist Church, Covington. **Please note that classes are filled on a "first come, first serve" basis.**

Co-op director's use only: Application received: Date _____ Time _____ HEA Member # _____ Confirmed _____
 Class/Book Fees: Total Due _____ Paid _____ Ck.# _____ Cash _____ Initial _____
 Registration Fee Paid: Ck# _____ Cash _____ Initial _____

