

Last Name _____

Ashe Schools of Home Education 2021-2022 Family Registration

Parent/Guardian	
Student Name(s)	
Address	
Contact Number	
Email(s)	
What are your primary interests in ASHE?	<input type="checkbox"/> Enrichment classes <input type="checkbox"/> Communication <input type="checkbox"/> Social Events <input type="checkbox"/> Field Trips <input type="checkbox"/> Support and resources <input type="checkbox"/> Sports
Are you new to homeschooling?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your homeschool registered with NCDNPE?	<input type="checkbox"/> Yes Name of Homeschool _____ <input type="checkbox"/> No

Method of Payment Date _____ Initials _____

- Cash
- Check
- PayPal