

HOME SCHOOL LEGAL DEFENSE ASSOCIATION

Are you currently a member? _____ If so, what is your renewal date? _____
If not, an application will be sent to you.

PARENT INFORMATION

Father's Place of Employment _____

Address _____

Telephone _____

Mother's Place of Employment _____

Address _____

Telephone _____ Time _____ Hours/wk. _____

Marital Status:
(Check all that apply)

Married
 Remarried

Divorced
 Widowed
 Single

If biological parents do not live at the same address, please list information of parent not living with child:

Name _____ Telephone _____

Address _____

Is this parent in agreement about homeschooling the children? _____
(explain below if necessary)