

Participant Enrollment Form

Eligibility Agreement

Please check appropriate Yes / No box		YES NO	
1 *Is your child enrolled in a Public or Private E-School? - [NAME:]			
*Is your child in a classroom setting MORE than 12.5 ho	urs per week? [Whe	re:	_]
Is your child enrolled at Faith Academy?			
]	
Is your child taking dual HS/College courses ? -			
-[College:	/ Semester Hrs	1	<u> </u>
			_
* Please Note: If you answered YES to question participate in WAHAA		NOT ELIGIBLE to	
purticipate iii WANAA	Atmetics.		
This section must be completed to be eligible.	Place an X in the	e box to show where the clas	s is being taken
		In Class / Co-	Ecademy /
Subjects This Semester	In Home	Op	College
			Dual
* I certify that my child is homeschooled based on the above alternative. *I understand that WAHAA is a homeschool organization and be 50% homeschooled (hours).	_		
Student Name (Print):			
Parent Signature:		Date:	