

2023-24 OCHEA + Co-op Application

*If joining only OCHEA, please use the OCHEA only application

Primary teacher/parent/guardian

Name: _____ Phone: _____

Spouse: _____

Address: _____ City: _____ Zip: _____

*Email: _____

(Correspondence is handled through email and Heylo communication platform)

Student information: Include nursery children and their ages. Please be thorough in listing all medical conditions including allergies and daily medications for each child as well as any special learning needs.

First/last name	Age	DOB	Upcoming Grade	Sex (M/F)
1.				
Medical:				
2.				
Medical:				
3.				
Medical:				
4.				
Medical:				
5.				
Medical:				
6.				
Medical:				

Emergency Contact Information

Name: _____ Relationship: _____ Phone: _____

Children's Family Doctor: _____ Phone: _____

If you are registering student(s) in Intermediate (middle school) or Secondary (high school) classes, please make class selections on the next page.

Your Accountability group (SCAIHS, Homeward, etc.) _____

OCHEA membership fee for one school term (August 2023-May 2024) is \$15 per family. Co-op tuition is \$90/year per Primary student and \$35/class for Intermediate/Secondary students + \$25 science lab fee. Use the next page to total your fees. OCHEA membership and HALF tuition is due with application. Please mail application and payment to: OCHEA, PO Box 2498 Orangeburg, SC 29116. Checks can be made payable to OCHEA.

Intermediate/Secondary Student Registration:

Please write in 3 class choices for each student. Check the class schedule to ensure no time conflicts occur. If your child has an empty time slot, they **MUST** attend Study Hall. (There is no charge for Study Hall.)


Student #1 Name: _____ Grade: _____
 Class #1: _____ cost: \$ _____
 Class #2: _____ cost: \$ _____
 Class #3: _____ cost: \$ _____ Student total:\$ _____

Student #2 Name: _____ Grade: _____
 Class #1: _____ cost: \$ _____
 Class #2: _____ cost: \$ _____
 Class #3: _____ cost: \$ _____ Student total:\$ _____

Student #3 Name: _____ Grade: _____
 Class #1: _____ cost: \$ _____
 Class #2: _____ cost: \$ _____
 Class #3: _____ cost: \$ _____ Student total:\$ _____

Student #4 Name: _____ Grade: _____
 Class #1: _____ cost: \$ _____
 Class #2: _____ cost: \$ _____
 Class #3: _____ cost: \$ _____ Student total:\$ _____

* Half of tuition fees are due with application. The remaining half will be due February 1st.

	Cost per year	Total Tuition	Tuition ÷ 2
OCHEA Membership	\$15	-	\$15
Primary student registration	\$90 X #of children		
Intermediate/Secondary student(s) total from above	\$35/year class (+\$25 science lab fee)		+
Total Due now			

By signing below, I acknowledge that I have read OCHEA's group information/member guidelines, and I understand the obligations, privileges, and qualifications for membership. My family shares OCHEA's mission statement and agrees to the membership terms. I understand I must attend the **MANDATORY** planning meeting at the start of the school year.

I have also read the Co-op Handbook, understand and agree to all policies AND have explained them to my children.

SIGN: _____ **Date:** _____