

Homeschool Association of Switzerland

Bildung zu Hause Schweiz (BZH)

Membership Application

Number of memberships _____ (one vote per membership, min. 1 per family)

Last Name, First Name (Parent / Guardian) _____

Last Name, First Name (Parent / Guardian) _____

Name of Child	Birth Date	H.E.?	Name of Child	Birth Date	H.E.?

HE = Home Educated?

Address _____

Telephone / E-mail _____

So that we can better support you, we would be glad to know something about you. Your comments are optional and can include the reasons you teach your children at home, how long you have taught them, your choice of learning materials, your education level, your family language and / or your experience with the school authorities.

Do you need specific support? _____

Town, Date: _____ Signature: _____

Acceptance as a member of "Bildung zu Hause Schweiz" will be confirmed in writing by the board.

Annual membership fee: 50 SFr. per member. Swiss Post Account # 87-187768-8

Complete and return this form by E-Mail to: info@homeschool.ch
 or by post to: Bildung zu Hause Schweiz, CH-3000 Bern, Switzerland

If are interested in supporting the organization with your time, please contact us. We are always glad for co-workers.