

Registration Form For THRILL Group

THRILL is open to all 8th-12th graders in the SHIELD Home School Group

Name of student_____

Address_____

Phone Number_____

Email Address_____

(Email will be the main form of communication besides the meetings so it is important that we have this information.)

Parents' Name_____

Parents' Email Address_____

The membership fee for THRILL is \$10 per family. Please make checks out to Kim Creech. Please return this form with the membership fee to:

Kim Creech
516 Hallsborough Dr.
W. Columbia, SC 29170

Do you have ideas for volunteer service projects that we can do this year? Please list your ideas below.

1. _____

2. _____

3. _____

4. _____

5. _____