NEW HORIZONS CHARTER SCHOOL SOCIETY

DECLARATION OF UNDERSTANDING

The New Horizons Charter School Society (NHCSS) is a non-profit charitable organization dedicated to operating New Horizons School, a school for academically gifted children. The Society is governed by an elected Board of Directors and this Board is the governing body of New Horizons School. Parents/guardians, as defined in the Education Act, Family Law Act and any statute that may be substituted therefore, of students attending New Horizons School have the right to membership in the Society without paying a membership fee. Other persons may become Community Members by paying a membership fee and subject to Board approval.

As a member of the NHCSS, I understand that I have a right to stand for election to the Board of Directors, the right to speak at Board and Society Meetings, the right to vote on Special Resolutions at General Meetings of the Society, and the right to request the addition of agenda items for Board Meetings. I understand these rights and other terms of membership are detailed in the NHCSS Bylaws.

As a member of the Society, I understand that I have a responsibility to be an active, informed and supportive participant in Society affairs as they relate to New Horizons School.

I agree with the statements contained in this document, and, understanding the rights and responsibilities involved, wish to become a member of the New Horizons Charter School Society. I declare my support for the NHCSS and I agree to act in accordance with the Society Bylaws.

Member*	**Member***
*If both parents desire membership, both must sign to indicate agreement with the statements of this document.	
Name:	Name:
Address:	Address: ☐ same (if different, complete the following)
Street Address	Street Address
City	City
Postal Code	Postal Code
Phone No:	Phone No: ☐ same (if different, complete the following)
Home	Home
Work	Work
Email:	Email:
Membership Type ____ I am a parent of a student at NHS ____ I am a legal guardian of a student at NHS ____ I am a staff member at NHS ____ I am a Community Member - $10 annual fee (Cheques payable to New Horizons Charter School Society	Membership Type ____ I am a parent of a student at NHS ____ I am a legal guardian of a student at NHS ____ I am a staff member at NHS ____ I am a Community Member - $10 annual fee (Cheques payable to New Horizons Charter School Society
Date:	Date:
Signature:	Signature:

Name of Youngest Child at NHS: _____ Class: _____

(NHCSS correspondence will be emailed to the email address registered at the school, if applicable)

To become a first-time member of the Society, or to renew your current membership, please complete and sign the above *Declaration of Understanding* and return it to the office. For new members, forms must be received **by 4:00 pm on Tuesday, September 13, 2022** to vote in the 2022 Special General Meeting**.** Membership completed this school year expire the day prior to the Annual General Meeting of the NHCS Society in the year 2023.

For NHCSS Use: Date Membership Form Received: _____