



Enriching the home-school family by providing a quality program grounded in a biblical worldview.

www.olivetreeschool.org

Middle School Application for Enrollment

For School Year: 2025-2026

Make sure student's grade level matches school year

For enrolling multiple students; address, contact & parent section is only needed on one form

Student Name: _____

Age: _____ Birthdate: _____ 25/26 Grade: _____

Address: _____

City: _____ Zip: _____

Mother's Name: _____ Father's Name: _____

Mother's Cell: _____ Father's Cell: _____

Parent E-mail Address: _____

**Please note: OliveTree Admin communicates mainly via email – please check it regularly!
Our Database only allows one main email address**

Parent Section – Parents please fill out this section

What church do you attend? _____

Pastor Contact: _____

How did you hear about OliveTree? _____

- I have read the Statement of Faith in the Participation Agreement and acknowledge that OliveTree Board Members and Teachers operate in accord with this statement. I agree that OliveTree will teach my student in accordance with this statement of faith.
_____ (parent initials)
- I understand my student will be held to a Christian standard as outlined in the OliveTree Participation Agreement while attending OliveTree and I will support OliveTree in upholding all standards and policies for OliveTree as they pertain to my student.
_____ (parent initials)
- I understand OliveTree is a support for my own home school, not a replacement for it. I will be available to assist and supervise my student during the week.
_____ (parent initials)
- I will communicate with my student’s teachers as needed and I will check email regularly. Additionally, I will email the teachers to get the assignment when we will be absent.
_____ (parent initials)

Parent signature: _____

Student Section - to be filled out by the student

1. Why do you want to attend OliveTree?

(use back if needed)

2. Do you attend church with your parents?

3. Have you made a profession of faith in Christ? _____

If yes, please provide a brief testimony of how you came to have faith in Christ.

(use back if needed)

4. Do you have any special needs as a student?

I understand I will be held to a Christian standard of conduct and dress code as outlined in the OliveTree Participation Agreement on the website, while attending OliveTree.

Please sign, indicating you have read and will abide by the OliveTree Participation Agreement.

Student Signature: _____

Registration Information

OliveTree is a non-profit home-school support program. We are dedicated to bringing the student a quality experience at the lowest possible cost to families.

Registration Fee of \$139 per family, per year is due at the time of enrollment.

The Registration Fee is non-refundable. If a class is full your Registration Fee will be returned.

Class size is limited. Classes are filled on a first come, first served basis.

Only Enrollment Forms with the Registration Fee will be accepted.

You will be notified of acceptance via email at the beginning of June.

Please make checks payable to: OliveTree

Send Application, Waiver, and Registration Fee to:

OliveTree, 2912 Rocky Mountain Ct., Ft. Collins, Co. 80526

For questions contact: Barbara Frasco barbarafrasco@gmail.com 970-581-8807

Tuition: Tuition is per student, per 15-week semester (Algebra 1 is 17 weeks).

There are 2 semesters in the school year.

Tuition is due on or before the first day of classes for the 1st & 2nd semester.

Tuition can be paid in 3 equal payments. We will email tuition statements to you.

Please see the Tuition tab on the website for Tuition fees.

OliveTree is a 501c3 non-profit. You may make tax-deductible donations to OliveTree by writing GIFT on the memo line of your check. You will receive a tax receipt.

Please submit Application, Waiver of Liability, and Registration fee to enroll.

Things to know:

- OliveTree rents classroom space from Summitview Church; therefore, students are not allowed to be anywhere on the church campus (inside or outside) unsupervised. Please ensure you are able to pick up your students up in a timely manner.
- Students must have their textbooks for the first day of class – please plan accordingly.
- Parental involvement is commensurate with your students' ability to work independently.
- OliveTree does not have resource help or tutoring available, parents assume this role.
- Parents must see to it that our Dress Code, hair length and color expectations are met.

Enrollment Information

Check box for 6th, 7th, or 8th grade Block of Classes Thursdays 12:00 – 4:00 pm

Circle any Options you want to add (Math classes meet Tue AND Thur)

Note - Student's enrolled in the Block of classes receive priority to attend the Options

Time	<input type="checkbox"/> 6 th Grade Block	<input type="checkbox"/> 7 th Grade Block	<input type="checkbox"/> 8 th Grade Block
12:30	Art	General Science Lab	Composition
1:40	Logic	WriteShop	Physical Science Lab
2:50	Science Lab	Effective Communication	Worldview

OliveTree reserves the right to cancel a class if minimum enrollment is not met.

CIRCLE OPTION:

See TUITION TAB for costs

CIRCLE TIME:

Option 1	Add Vocal Ensemble	8:30 am or 9:40 am	Thur
Option 2	Add Book Club	10:50 am	Thur
Option 3	Add Middle School Art	10:50 am	Thur
Option 4	Add Middle School P.E.	8:30 am	Tue
Option 5	Add Math Fundamentals (6/7)	9:40 am	Tue & Thur
Option 6	Add Pre-Algebra (7/8)	10:50 am	Tue & Thur
Option 7	Add Algebra 1 (High School class)	9:40 am	Tue & Thur
Option 8	Add Study Hall	9:40 am or 10:50 am	Tue & Thur

Check this box if your student will join us for brown bag lunch on **Tuesdays @ 12** (no fee)

Check this box if your student will join us for brown bag lunch on **Thursdays @ 12** (no fee)

To purchase your books, see the Book List & Class Descriptions page on the website.

For Algebra 1, see High School tab on website. Algebra 1 meets for 17 weeks.

Tear off and bring this schedule to the first day of classes

Student Name:

Tuesday

9:40 class _____

10:50 class _____

12:00 _____

Thursday

8:30 class _____

9:40 class _____

10:50 class _____

12:00 _____

12:30 class _____

1:40 class _____

2:50 class _____



Olive Tree Homeschool Support Program

Waiver of Liability & Emergency Medical Authorization & Photo Release

HEALTH AND ACCIDENT

I, the parent of (list ALL students) _____

release the faculty and staff of the Olive Tree Homeschool Enrichment Program (the "Program") from liability for damages or injuries resulting from my students participation in all normal Program activities. Safety rules are an important part of leaning in any environment, and I understand that every effort will be made to teach my student the rules of safe conduct while he/she is attending the Program. I will not hold the faculty or staff or the Program or Summitview Community Church responsible, either jointly or severally, for injuries that result from my students direct disobedience of prescribed safety rules.

DISCIPLINE

I understand that the purpose of attendance at the Program is to teach or enrich my student academically. I understand that if my student is disruptive during classes, the other students are unable to benefit from instruction. The Faculty and/or Staff may find it necessary to notify me that my student should be sent home if this situation occurs. If disruptive behavior continues, the Faculty and/or Staff may require expulsion of my student from the class(es) he/she may be enrolled in at that time. I understand that if expulsion is required, program fees will be prorated from the day my student was expelled with the remaining balance returned to me within 30 days following expulsion. Registration fees will be forfeited if expulsion occurs.

EMERGENCIES

In case of an emergency, I understand that every effort will be made to contact you and/or the persons below. However, if you/they cannot be contacted, I hereby authorize a faculty or Staff member of the Program and/or a physician selected by the faculty or staff member, to secure an indicated treatment, including hospitalization, to safeguard the welfare of my student. I will accept responsibility for all expenses incurred in such treatment.

PHOTO RELEASE

Please be advised that your child/children may be photographed or videotaped for use in OliveTree's slideshows, website, Facebook, events or email publications.

In case of an Emergency, please contact:

Name: _____ Phone: _____

Name: _____ Phone: _____

Health Treatment Information:

Do you have Health Insurance Carrier? Yes ___ No ___

Carrier Name: _____ Policy # _____

Family Doctor/Pediatrician: _____

Phone and address: _____

Known Allergies: _____

Individuals (other than parents) Authorized to Pick-Up my/our Child(ren):

Name: _____ Phone: _____ Relationship: _____

I understand and agree to the policies, provisions, waivers and photo release above:

Parent Signature: _____ Date: _____



Olive Tree Homeschool Support Program

Parent and Student Acknowledgement of Positions and Policies

We have read the Participation Agreement and reviewed the 'code of conduct' with our student(s).

We have read the OliveTree Statement of Faith and Statement on Biblical Sexual Morality in the Participation Agreement and understand that teachers and courses will be oriented and aligned with this perspective.

We understand and will comply with the Dress Code and hair length and color expectations.

We understand that we as a parent will be informed by an OliveTree teacher or Administrator if our student engages in persistent disruptive, disrespectful, or disobedient behavior.

PRINT Family Last Name

Child

Parent Signature

Child

Child

Child

Thank you for helping us make OliveTree a quality experience for all the students.

Please read the Participation Agreement on website with your students right before classes begin. Sign and return this page to OliveTree on the first day.

For High School Students Only - Open High School Campus

OliveTree is an open campus for High School students only. Students enrolled in Study Hall and/or Lunch period need to report to the Study Hall/Lunch monitor if they are leaving campus. Students need to leave the premises in a timely manner. Students are not allowed to be outside in the parking lot or grassy area at SVCC unsupervised. Please initial below:

Please check ONE:

My High School student(s) does not have permission to leave campus _____

My High School student(s) has permission to leave campus (**checkout required**) _____

I/we will not hold the faculty or staff or the Program or Summitview Community Church responsible, either jointly or severally, for injuries that result from my/our student(s) while off campus.

Parent signature(s): _____