



**HARVEST**  
Homeschool Academy

**FAMILY APPLICATION FORM**

Please submit the completed application, signed statement of faith, signed last page of the handbook, and a non-refundable registration fee of \$160 by April 2, 2021.

Applicants will be contacted after applications are reviewed by the Leadership Team.

**FAMILY INFORMATION**

_____		_____	
Family Name		Date of Registration	
_____		_____	
Parent Name		Parent Name	
_____		_____	
Home Phone	Cell or Work Phone	Home Phone	Cell or Work Phone
_____		_____	
Email Address		Email Address	
_____		_____	
Address		Address	
_____		_____	
City, State, ZIP		City, State, ZIP	

**EMERGENCY CONTACT INFORMATION**

_____		_____	
Primary Emergency Contact		Secondary Emergency Contact	
_____		_____	
Home Phone	Cell or Work Phone	Home Phone	Cell or Work Phone
_____		_____	
Address		Address	
_____		_____	
City, State, ZIP		City, State, ZIP	

Registration for: Thursday only \_\_\_\_\_ Thursday & Monday \_\_\_\_\_

List any of the families in our current group you know:

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What are the ages of your kids (please provide their birth dates)? What grades do you consider them to be in this coming school year (as of 9/1/21)? Do any of them have any allergies or special needs we should be aware of?

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Number of years homeschooling: \_\_\_\_\_

Describe your homeschooling philosophy.

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What is your familiarity with Classical Education?

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What draws you to Harvest Homeschool Academy?

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Every parent teaches and serves in our co-op. List some areas in which you have training, experience, or interest where you would be willing to teach or serve. Please indicate your top three preferences for classes to teach.

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Please share a testimony of your relationship with God, both when you came to know the Lord, as well as your current relationship.

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Are you a member in good standing of a local church? If so, which one? If not, why not?

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