

*Pleasant Green United Methodist Church*

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Jo Anna Walker Brown, Director  
(919) 383-5764 Church  
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**Application for Afterschool Program / Summer Day Camp**

School Year \_\_\_\_\_

Name of Student: \_\_\_\_\_  
Last First Middle

Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year T-Shirt Size \_\_\_\_\_

Address \_\_\_\_\_

Home Phone # \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Grade in Fall: \_\_\_\_\_ School: \_\_\_\_\_ Teacher \_\_\_\_\_

Student will be full-time \_\_\_\_\_ Part-time (List days) \_\_\_\_\_

**Parents Information**

Marital Status: \_\_\_\_\_ If separated/divorced, custodial parent: \_\_\_\_\_

Are parents members of a church? If so, name of church: \_\_\_\_\_

Name of Mother/Guardian: _____
Address _____ Home Phone # _____
Where Employed _____ Phone # _____ Cell Phone# _____

Name of Father/Guardian: _____
Address _____ Home Phone # _____
Where Employed _____ Phone # _____ Cell Phone# _____

Other children in home (list below)		
Name _____	Sex M/F _____	Age _____
Name _____	Sex M/F _____	Age _____

**Field Trip Permission**

Child's Name \_\_\_\_\_ has my permission to go on all field trips during this Afterschool / Summer Camp session.

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

