Paradise Hills United Methodist Church

Enrollment Form

Session I **Summer 2023** Session II

Child's Name:_____

Last First ZIP

Address: _____City:_____ Code_____

Age on Male_____ Is your Family Y

DOB: _____ **June 1, 2023:** _____ Female_____ Re-Enrolling? N

School Last Attended _____ Sibling Enrolled at PHUMC: _____

Home Church_____*If you do not have a home church, would you like to receive some information about Paradise Hills Church?

Father/Guardian Information

Father's Name: _____

Address: _____

Best Contact Number_____

Employer_____

Occupation_____

Work Number_____

Email_____

Mother/Guardian Information

Mother's Name: _____

Address:_____

Best Contact Number_____

Employer_____

Occupation_____

Work Number_____

Email _____

Summer Program Ages

2's 3's 4's Entering Kindergarten School Age:____Entering Grade (?)

OFFICE USE ONLY **OFFICE USE ONLY**

Enrollment Date_____ First Day Attending_____ Discharge Date_____

Check #_____ Immunization Records _____

Cash _____

OFFICE USE ONLY Rec'd By _____ Forms _____ **OFFICE USE ONLY**