Pasco County Foster/Adoptive Parent Association - www.pascofapa.com

Form must be clearly written and complete, or it will not be processed.

Angel Program

*The Angel Program is for all children of parents who are General and/or Honorary Members only of the Foster/Adoptive association ages 0 - 18 and have completed **5** hours of volunteer work and attended at least **5** meetings between the time period of 11/1/18 - 10/31/19.* ***Please write legibly.***

Child's Name:	Child's Name:	Child's Name:
Age: Sex:	Age: Sex:	Age: Sex:
| □ Bio | □ Adopted | □ Foster | □ Other |	| □ Bio | □ Adopted | □ Foster | □ Other |	| □ Bio | □ Adopted | □ Foster | □ Other |
Grade:	Grade:	Grade:
Pant Size: Child / Adult	Pant Size: Child / Adult	Pant Size: Child / Adult
Shirt Size: Child / Adult	Shirt Size: Child / Adult	Shirt Size: Child / Adult
Shoe Size: Child / Adult	Shoe Size: Child / Adult	Shoe Size: Child / Adult
Favorite Color:	Favorite Color:	Favorite Color:
Wish List:	**Wish List:**	**Wish List:**
1	1	1
2	2	2
3	3	3
4	4	4

Parent's Name: _____ *Address:* _____

Home Phone: _____ *Cell Phone:* _____ *Email Address:* _____

Licensing Specialist: _____ *CBC's Name:* _____ *Phone #:* _____

We will be contacting your licensing specialist to verify the names of the children in your home.

	Rcv'd
	Volunteer Hours
	Meetings Attended

Please Send Completed Application To:

PCFAPA, PO Box 4002, Holiday, FL 34692

****** This form must be received no later than Nov. 1st ******

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This is a supplemental program and it is not intended to supply you with all of your children's Christmas wishes. Please be mindful of the economy when making your wish list and remember that this program is 100% funded by gracious donations from our community.

The PCFAPA Board reserves the right to exclude items that it feels are unrealistic or unreasonable. i.e.: xBox, Wii, PlayStation, Cars, Laptops, etc.