

**CHRISTMAS FOR KIDS 2016
SHOP WITH A COP APPLICATION**

DATE: _____

Child's Name	Age	Address	Phone#	Parent/Guardian
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

What school does he/she attend: _____

Has this/these child/children participated in Christmas for Kids Program in the past? Yes ___ No ___

If so, how many times? _____ How Long Ago? _____

Is the parent/guardian employed? Yes _____ No _____

If so, where and for how long _____

Please provide reason for applying: _____

Additional Contact Information: _____

Do you expect any other assistance with gifts for child/children: Yes _____ No _____

Application deadline is: December 9, 2016

Application received by: _____