



2017 Shop With A Cop Application

Casper Police Department, , Mills Police Department
and Natrona County Sheriff's Office

In Partnership with the Casper Westside
Walmart Store

December 9th, 2017



Shop With A Cop

The Casper Police Department, Natrona County Sheriff's Office and Mills Police Department welcomes the opportunity to work with families in our community, especially those with underprivileged children who may not have the same opportunities as others their age. Shop With A Cop is one of the ways we strive to strengthen our community and reach out to these families.

Our Departments strive to make this a positive experience for the children. In partnership with Walmart, children in need are able to purchase gifts for Christmas, including ones for themselves as well as other family members. Applications will be accepted from all Natrona County Law Enforcement Agencies and participating agencies also include, the Evansville and Midwest Police Departments, Wyoming Highway Patrol, Wyoming Game and Fish, Natrona County Airport and US Customs.

Deadline for Applications is: **November 27, 2017**

Families notification will begin: **December 5, 2017**

Shop With A Cop will be held on **December 9th, 2017**

Criteria

- ◆ Children must be 3-12 years old to participate.
- ◆ Family resides in Natrona County.
- ◆ Child must be able to separate from families while shopping.
- ◆ Child must be present on the shopping day in order to receive a gift card.

A committee will make selections from the applications based on information received through applications. Families who have not participated before will be given priority, however all applications will be given serious consideration. Given the popularity of the program, we may have more applicants than openings.

By completing and signing this application, you give the Casper Police Department the right to make inquiries to other organization about assistance you are receiving. Your signature also give the Casper Police Department permission to publish pictures taken during the event.

Signature: _____ **Date:** _____



Please fill out the application completely , all application must be mailed or dropped off to the appropriate address below.

CHILD INFORMATION:

Child's Name _____ Age _____ Male _____ Female _____

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Child's Name _____ Age _____ Male _____ Female _____

Child's Name _____ Age _____ Male _____ Female _____

Name of Responsible Party: _____

Relationship to Child: (check one) Parent _____ Foster Parent _____ Guardian _____

Other: _____ Referring Agency: _____

Street Address: _____ City: _____

Phone Number: _____

Total Household Income: \$0-\$9,999 _____ \$10,000-14, 999 _____ \$15, 000-19,999 _____

\$20,000-24,999 _____ \$25,000-29,999 _____ \$35,000- 39,000 _____ Over \$40,000 _____

Number of People Living at this Address: _____ Are you presently working? _____

- If no please provide a reason: _____
- If yes, name or company or organization: _____

Primary Reason this child or family is being referred: _____

Is this child going to be involved with or nominated for any other program? ___ yes ___ no

If so, list the organizations: _____

Return Applications to:

Casper Police Department

Victim Services

201 N, David, 1st Floor

Casper, WY 82601