2026 SHOP WITH A COP PROGRAM FOR DELAWARE COUNTY

Please read the entire form before completing and turning it in.

Everyone must fill out this application. **This application is for SHOP WITH A COP.**

This program is for children who live in **Delaware County ONLY** - if you live outside of Delaware County you will be removed from the list. **Ages that are going to be accepted this year: 4 years old - 16 years old.** If your child is **3 or younger**, you will need to fill out an angel tree application or toys for tots.
If your child is **4 years old to 16 years old**, they can apply to participate in SHOP WITH A COP.
Shop with a cop will be on **December 16th and 17th**. We will contact you to set up a time for one of those two days for you to take your child(ren) to Grove Walmart to shop with a first responder, if their application is accepted, where they will spend a set amount on themselves and be asked to gift a sibling or parent.

Please complete all the requested information below. **Shop with a cop applications can be turned in to your local police department as soon as possible.** Again angel tree applications (a separate application) should be completed and turned into a separate location.
DO NOT email or Facebook message application forms.

ALL COMPLETED FORMS MUST BE TURNED IN to your local police station BY Friday November 20th, 4PM.
NO FORMS WILL BE ACCEPTED AFTER THIS TIME.

WE MUST HAVE A GOOD CONTACT PHONE NUMBER TO BE ABLE TO CONTACT YOU!!

Contact Parent/Guardian Name: _____

Phone Number: _____

Secondary Phone Number: _____
(We MUST be able to get ahold of you)

Physical Address: _____

School Children Attend: _____

- **For Children 16 years of age and younger, please complete all the requested information.**
- **You may not be selected if this form is incomplete or is missing information.**
- **Children must live in & attend school in Delaware County to be eligible for this program.**
- ***If you are on a different gift distribution list, such as Cherokee Nation or Toys for Tots you are NOT eligible for this program - pick ONE program. We will contact CN, along with all other Angel Tree programs in the area , you will be removed from this if you have signed up for another.***

**By signing below you authorize releasing your household members' information to those involved in SHOP WITH A COP and also confirming you will get your child to Grove Walmart to participate.

Guardian Signature: _____

Please be specific on sizes. There are children, youth, and adult sizes, so be specific. Consider listing needs such as a coat, a blanket, a pillow, socks, a hat, or gloves if these are items your child could benefit from. If you aren't sure what your child wants for Christmas, give us ideas of what they like to do: read, draw, sports, be outside. These will help our volunteers to help your child(ren) shop.

Thank you for allowing us to help your family during this holiday season.

CHILDREN's FIRST & LAST NAMES & AGES

1. _____ 5. _____
2. _____ 6. _____
3. _____ 7. _____
4. _____ 8. _____

The following information is needed on each child (Age 4 - 16 years old)
This information will assist the volunteers in shopping with your child(ren).

Child Name:	**Age: _____** **Circle One:** **Boy** **Girl**	**Shirt Size:** _____ **Pant Size:** _____ **Shoe Size:** _____	**Needs or Wish List:**

Child Name:	Age: _____ Circle One: Boy Girl	Shirt Size: _____ Pant Size: _____ Shoe Size: _____	Needs or Wish List:

Child Name:	Age: _____ Circle One: Boy Girl	Shirt Size: _____ Pant Size: _____ Shoe Size: _____	Needs or Wish List:

Child Name:	Age: _____ Circle One: Boy Girl	Shirt Size: _____ Pant Size: _____ Shoe Size: _____	Needs or Wish List:

Child Name:	Age: _____ Circle One: Boy Girl	Shirt Size: _____ Pant Size: _____ Shoe Size: _____	Needs or Wish List:

Child Name:	Age: _____ Circle One: Boy Girl	Shirt Size: _____ Pant Size: _____ Shoe Size: _____	Needs or Wish List:

Child Name:	Age: _____ Circle One: Boy Girl	Shirt Size: _____ Pant Size: _____ Shoe Size: _____	Needs or Wish List: