



SHERIFF WAYNE IVEY

BREVARD COUNTY SHERIFF'S OFFICE

700 S. Park Avenue ★ Titusville, Florida 32780-4095 ★ (321) 264-5201 ★ (321) 264-5360 fax ★ www.BrevardSheriff.com

Brevard County Jail Complex
860 Camp Road
Cocoa, FL 32927
(321) 690-1500
(321) 635-7800 fax

Canaveral Precinct
111 Polk Avenue
Cape Canaveral, FL 32920
(321) 868-1113
(321) 784-8340 fax

Criminal Investigative Services
340 Gus Hipp Boulevard
Rockledge, FL 32955
(321) 633-8499
(321) 633-8403 fax

East Precinct
2575 N. Courtenay Pkwy.
Merritt Island, FL 32953
(321) 454-6652
(321) 454-6631 fax

North Precinct
2290 Columbia Boulevard
Titusville, FL 32780
(321) 264-5208
(321) 264-5359 fax

Operational Services
2575 N. Courtenay Pkwy.
Merritt Island, FL 32953
(321) 454-6643
(321) 454-6642 fax

South Precinct
1515 Sarno Road, Bldg B.
Melbourne, FL 32935
(321) 253-6658
or (772) 664-1015
(321) 253-6666 fax

West Precinct
2725 Judge Fran Jamieson
Way, Bldg. E
Viera, FL 32940
(321) 633-2123
(321) 633-1965 fax

Dear Parent,

On December 12, 2020, the Brevard County Sheriff's Office and the Brevard County Sheriff's Office Charity, Inc. along with the Police Athletic League (P.A.L.) will be hosting the 13th annual Christmas Program - **Shop with a Cop** at the following location:

Viera Target – 8455 N Wickham Rd, Melbourne, FL 32940

If your child has been chosen to participate, you will be notified by mail..

Shop with a Cop is an outreach program designed to assist children who are at risk due to their current economic situation, their environment and other factors. Applications for **Shop with a Cop** are due to the Brevard County Sheriff's Office Community Services no later than November 18, 2020. They can be mailed to Community Services at 700 Park Ave., Titusville, FL 32780.

The following information must accompany all applications:

A copy of a current pay stub for proof of employment is highly encouraged.

Proof of financial assistance (Medicaid, Medicare, WIC, SSI, Disability, State Welfare, Stay Well, Florida Kid Care, Well Care, Section 8 Housing (HUD), Reduced or Free Lunch Forms). EBT Cards, Medicaid and Medicare Cards will only be accepted if you have a receipt of use within 7 days or you will have to provide paperwork from the agency stating you currently receive food assistance or Medicaid/Medicare privileges.

A birth certificate and (if applicable) proof of guardianship for each child listed on the application.

You must provide proof that you reside in Brevard County, FL. We will need a valid driver's license or picture ID card listing your current address. If your address is not correct on your license or ID, you will also need to provide a utilities bill in your name with your current address.

If your application is approved, you will be notified via letter no later than December 8, 2020. With the confirmation letter you will be provided an admission ticket and **ONLY** the children listed on the ticket will be admitted. The ticket **MUST** be brought on the day of the event or your child will not be allowed entry. Your child(ren) must not be enrolled in any other Christmas give away outreach programs to be eligible for participation. Parents are not allowed to shop with their child during the event and should wait for their children in the designated area.

Submitting this application does not guarantee acceptance or participation. Each application and supporting documents will be reviewed to determine which families are in need the most – we do not select applications based on the date we receive them.

Sincerely,

Sheriff Wayne Ivey
Brevard County Sheriff





SHERIFF WAYNE IVEY

BREVARD COUNTY SHERIFF'S OFFICE

2020 SHOP WITH A COP APPLICATION

Parent / Guardian Name: _____

Home Address: _____
 Street _____
 City _____ Zip _____

Telephone Number: _____

E-mail Address: _____

Place of Employment: _____

Job Title / Supervisor: _____

Work Telephone Number: _____

List Applicants between ages 5-14

List children under 5 for "gift only" purposes
Children under 5 **will not** be shopping

Name	Age	M/F	Children Under 5	Age	M/F

By signing this document, you are authorizing your child(ren) to participate in **Shop with A Cop**, have their photograph taken, and possibly be published, and acknowledge you are not requesting assistance from any other charitable organization in regards to holiday gifts. Your application can be cross-referenced with other charitable organizations.

Submitting this application does not guarantee acceptance or participation. Each application and supporting documents will be reviewed to determine which families are in need the most – we do not select applications based on the date we receive them.

Parent / Guardian Signature _____

Please return all applications and required documents to the Brevard County Sheriff's Office
Community Services Unit at:
700 S. Park Ave.
Titusville, FL 32780