



# SHERIFF WAYNE IVEY

# BREVARD COUNTY SHERIFF'S OFFICE

## 2024 SHOP WITH A COP/HANDLEBARS FOR THE HOLIDAYS PROGRAM APPLICATION

Parent / Guardian Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Street City Zip

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Job Title / Supervisor: \_\_\_\_\_

Work Telephone Number: \_\_\_\_\_

Are you applying for Shop with A Cop or the Handlebars for the Holidays Program? \_\_\_\_\_

Have you Been a Participant in Shop with A Cop or Handlebars for the Holidays In The Past? Yes \_\_\_ No \_\_\_ If So, How Many Times? \_\_\_\_\_

Have you Requested Assistance from Another Organization? Yes \_\_\_ No \_\_\_

List Applicants between ages 5-14 List children under 5 for "gift only" purposes

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 or Handlebars for the Holidays**, have their photograph taken, and possibly be published, and acknowledge you are not requesting assistance from any other charitable organization in regard to holiday gifts.

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