



In association with Miami County, Kansas Sheriff's Office

www.copsfortots.org

Household Size Monthly Income

Table with 2 columns: Household Size, Monthly Income. Rows: 1 Person (\$1,123), 2 Person (\$1,515), 3 Person (\$1,908), 4 Person (\$2,300), 5 Person (\$2,693), 6 Person (\$3,085)

(for additional Persons see www.copsfortots.org)

*Household members must be parent/children, foster parent/children, guardian/children.

*Household income includes all household members' income, including adult children or elderly adults living in the home

*Verification will be conducted. References must be authentic and should be able to verify current household size, income and circumstances.

Children who qualify will be any child enrolled in school that is 18 years of age and under, residing in the home described above.

The Miami County Cops for Tots organization is working to make the Christmas Holiday a bit brighter for Miami County resident "angels" (thru age 18) who may need a little extra attention during this Holiday season. If you or someone you know have children in need of Christmas gifts, please complete the information on this form and deliver or mail it to us at the Miami County Sheriff's Office, 118 S. Pearl, Paola. This form must be printed in the Landscape format!

All applications must be returned to us by December 5th, 2011. Late applications will not be accepted. This program is only for Miami County Kansas Residents. If you would like more information, please call 913-294-3232 ext 515 and leave a message including a phone number and time we may contact you.

*Please be aware that along with your child's angel # his/her first name will appear on the angel that is placed on our tree for adoption. This helps speed up the check-in of the gifts when they are returned to us for delivery to your child.

COPS FOR TOTS "ANGEL TREE" PROGRAM

SIGN UP / REGISTRATION FORM

Custodial Parent Name: _____

Street Address: _____ City _____

Home/Cell Phone#:(_____) _____ Work # (_____) _____

Source of Income: _____

No. of children in your household age 18 or under, still attending school (12th & under): _____

Reference Person and Phone # _____ Relationship: _____

Family's special needs or circumstances: _____

Other types of assistance applied for: _____

How many years have you received assistance from the Cops For Tots Program? _____

Will the gifts your child receives from the Cops For Tots program be the only gifts your child receives this year? Yes / No

It is ok to share this application with groups that may want to offer some additional assistance.

Please complete the Angel Information / Wish List on the back of this sheet)

Please Circle Y or N if your child needs or doesn't need these items. Be sure to put sizes for **all** items marked Y. The more information you provide the better we will be able to assist you and your family. **For each child's Wish list PLEASE provide 3-4 reasonable wish list items (EACH SHOULD COST NO MORE THAN \$50.) Gaming Systems will not be purchased.** If reasonable items are not listed, we will call for ideas within that price range.

Child's Full Name	Sex	Age	SSN/DOB	Shirt/ Top Y or N	Pants/ Jeans Y or N	Shoes/ Boots Y or N	Socks/ Slippers Y or N	Coat Y or N	Dress Y or N	Undergarments (include type) Y or N	Favorite Color or Shade
				Size	Size	Size	Size	Size	Size	Size and Type	
Wish List:											

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