

## SHOD WITH A CO

## CHILD NOMINATION FORM

Name of nominated child (one form per child):	
Age (must be 5+ years old):	
Parent/guardian name:	
Child's address (if known):	E O TO B
Parent/guardian phone number:	
Parent/guardian email:	
Please provide a brief description regarding why you are nomina	ating this child:



## FORMS MUST BE SUBMITTED BY DECEMBER 9TH, 2021

Please submit form at the Grain Valley Police Department: 711 N. Main, Grain Valley MO 64029

OR to the child's school counselor.



SHOP WITH A COP WILL TAKE PLACE ON DECEMBER 20TH, STARTING AT 6:00 PM. MORE DETAILS WILL BE SHARED WITH THOSE SELECTED AT A LATER DATE.