

Petersburg Sheriff's Office/Kiwanis Holiday Toy Drive



Registration Form

Please complete form in its entirety. Thanks.

Parent(s) Name _____

Address _____

City _____ State _____ Zip _____

Telephone No. _____

List children under the age of (17) seventeen.

	Name	Age	Gender
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

I certify that the above information is true and correct.

Signature

Date

Documents Verified by PSO Staff:

- Petersburg Resident
- Picture Identification Card
- Birth Certificate(s) for each child listed above

Vanessa R. Crawford _____ Approved _____ Date _____