



MERCED COUNTY
OPERATION
CHRISTMAS
STAR




Please complete this form and return to the Merced County Sheriff's Office front lobby or The Merced County Probation Department no later than **December 14, 2018**. Be sure to use your full name and physical address (No P.O. boxes). Incomplete applications will not be considered. Please write completely and legibly.

Name of Parent(s) or Caregiver(s): _____

Address: _____

City, State, Zip: _____

Telephone: _____ Alternate Phone: _____

Children Ages 0 to 18 years

First Name	Last Name	Age	Male / Female	Sizes / Wishlist
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Qualifications for the Program:

- * Low income family living in Merced County
- * Children under 18 years of age only

Information needed: (A copy of all documents need to be attached to be submitted with the application)

- * Copy of CA Drivers License or Photo Identification Card
- * Copy of utility bill in parent or guardian's name
- * Proof of all household income (pay stubs)

Gifts will be delivered by uniformed personnel from the Merced County Sheriff's Office and Probation Office no later than December 23, 2018.

Received Agency: _____ Name: _____ Date / Time: _____