

# CALIFORNIA CENTRAL COAST COPS 'N KIDS, INC.

## MEMBERSHIP APPLICATION

*Our Mission is to nurture, support, provide assistance to, and enhance the relationship between local law enforcement, the youth and their families within the California Central Coast.*

MEMBERSHIP REQUIRES THAT YOU SUPPORT LAW ENFORCEMENT AND THE MISSION, VISION, AND EFFORTS OF THIS ORGANIZATION.

### PERSONAL INFORMATION

Full Legal Name		Spouse/Partner Full Legal Name	
Home Address (Address, State, ZIP)		Mailing Address (if different)	
Current Occupation or Title		If retired, indicate where from and title	
Business Name		Business Address	
Type of Business	Position	Business Phone	
Mo/Day of Birth	Email		

Please write a brief statement of why you wish to be a member of the California Central Coast COPS 'N KIDS, Inc.

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Please list any interests or skills that you believe would benefit this organization as a member and if you have an interest in serving on a project or event committee please state so?

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Signature	Date	Sponsoring Member
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***Please submit \$50 membership fee along with this application. If your spouse or partner is applying for membership, please have them complete an additional application and submit an additional \$25 membership fee.***

▪ POST OFFICE BOX 731 ▪ NIPOMO, CA 93444-0731 ▪  
COPS 'N KIDS, Inc. is a 501(c)(3) registered non-profit EIN 68-0262503  
Website: COPSNKIDSIFA.ORG