



# PEACE OFFICER WIVES OF CALIFORNIA

## Application for Partnership/Affiliation

**Agency/Company/Organization/Business Name:**

\_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Your Agency/Company/Organization website address: \_\_\_\_\_

Additional location: \_\_\_\_\_

**Description of what your agency/company/organization/business does:**

\_\_\_\_\_

Government Entity \_\_\_ Private \_\_\_ Non-profit \_\_\_ Other/Specify \_\_\_\_\_

**Check off all the ways you would like to support and/or collaborate with Peace Officer Wives of CA**

**Support/collaborate a program/event:**

Name of program/event \_\_\_\_\_ Date \_\_\_\_\_

**Present Peace Officer Wives of CA as a benefit:**

New hire trainings  Staff Meeting  Onsite tabletop/Recurring visits  Briefings

Provide materials for your lobby/breakroom/other \_\_\_\_\_

Conferences/networking sessions/trainings  Peer support to spouses/loved ones

Advertising in your agency/organization/company publication  E-mail blast  Social Media

Listed as a resource/partner on your website/social accounts  In Kind Donation  Donation

Cross promotional opportunities (i.e. your agency/company/organization included as one of our partners/affiliations)

Other/Specify \_\_\_\_\_

Please include any supporting materials related to your request.

Thank you for your request! We will be in touch with you.

You may email us at [faith.wife.hero@gmail.com](mailto:faith.wife.hero@gmail.com)

Peace Officer Wives of California Inc.

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