



Delphos Police Department

205 E Second St.
Delphos, Ohio 45833

Safety City

Located at
901 WildCat Ln.
Office 419-695-1786 #415



Delphos Police/ Safety City Safety Student Application 2026

Student Name _____ (please print clearly)

Parent/Guardian's Full Name: _____

Address _____ Zip _____

Phone _____ Date of Birth _____ Age _____

Email address _____

School _____ Grade _____ T-Shirt Size _____

Preferred Session Date:

June 8-12	9am-11am	12pm-2pm
June 15-19	9am-11am	12pm-2pm
June 22-26	9am-11am	12pm-2pm
July 13-17	9am-11am	12pm-2pm
July 20-24	9am-11am	12pm-2pm
July 27-31	9am-11am	12pm-2pm

Please note that this is first come first serve basis and there is a limit to 30 students per class

I, the undersigned parent/guardian, hereby grant permission for my child to participate in the Safety City program. I understand that Safety City aims to educate children on safety practices in an interactive environment. I also understand that **PHOTOS** will be taken and may be shared in a public forum and/ or further advertising. I further acknowledge that participation in the program involves physical activities and potential exposure to various safety scenarios.

Parent/Guardian Signature: _____ Date: _____

Please return this completed form to SRO Fitzgerald III Thank you for your participation in Safety City!