

NHW CO-ORDINATOR & CMS REGISTRATION

Ref:

Assignee:

Please complete all sections in full [BLOCK CAPITALS] to register your Watch Scheme.

Section 1 : Your Contact Details

Title:

First Name:

Last Name:

House/Business Name:

Address:

Post Code:

Email:

Home Tel:

Work Tel:

Mobile:

Work Mobile:

Evening:

Section 2 : Watch Scheme Details

Name of Watch:

Coordinator Name (Named in Section 1):

Deputy Coordinator Name (Named in Section 1):

Please tick the type of Watch Scheme below:

Rural Watch Business Watch Pub Watch

School Watch Neighbourhood Watch

Other (please state):

Number of properties in scheme:

Property numbers covered:

Nature of Business / Organisation:

Section 2a: Watch Scheme Signs

(Only Coordinators may order)

Sign order form attached:

Yes No

Section 3: CMS Messages

Messages will be sent by email unless you are unable to receive by this means. Please indicate below if you wish to receive an alternative:

Text Voice

I, the undersigned, give authority for my details to be placed on a computerised database in accordance with the Data Protection Act 1998. I understand that my rights are protected and that this information will only be used by North Yorkshire Police and North Yorkshire Neighbourhood Watch. I agree that I will receive messages via the Community Messaging System and shall act responsibly, as a NHW/NYP volunteer in ensuring that information is duly circulated to scheme members, with discretion. I will not inappropriately share any sensitive information that I may gather from close coordination with NYP.

I confirm I have read the Ethics & Standards guidelines overleaf and I understand that any breach of this code could result in my removal from Neighbourhood & Rural Watch.

Signature:

Date: