

NEIGHBOURHOOD WATCH SCHEME @ LOCKING PARKLANDS

I / We are interested in being member/s of the local Neighbourhood Watch at Locking Parklands which you are proposing and subject to availability, will attend a meeting to launch the new watch in this area.			
FIRST NAME		SURNAME	
ADDRESS:			
POST CODE	BS24	TEL NO	
E-MAIL			
I / WE wish to become members of the Locking Parklands Neighbourhood Watch Scheme.			Please tick box YES <input type="checkbox"/>
I would be prepared to be a STREET/AREA CO-ORDINATOR			Please tick box YES <input type="checkbox"/>
State the STREET NAME			
I would be prepared to be a DEVELOPMENT CO-ORDINATOR			Please tick box YES <input type="checkbox"/>
I consent to the details provided as an indication of my interest in becoming a member of the NHW at Locking Parklands.		YES <input type="checkbox"/>	Please tick box where appropriate
Please provide notice of meetings/ information/updates regarding the scheme		YES <input type="checkbox"/>	
Please contact by POST		YES <input type="checkbox"/>	
Please contact by e-mail		YES <input type="checkbox"/>	
Your data will only be used as an entry on the membership database and for contact purposes with information relating to the scheme. You may withdraw this consent at any time in writing to LP CIC at lpshadcic@gmail.com			
SIGNATURE:			Date: