<b>OKOTOKS AREA RURAL</b> <b>CRIME WATCH ASSOCIATION</b> In Cooperation with the R.C.M.P. Farmer's Advocate, Alberta Cattle Commission, Alberta Justice, and Natural Resources (Fish and Wildlife) www.oarpcwa.org
Date:
Surname:
Given Names (all):
Maiden Name (if applicable):
Occupation: Employer:
* Please provide photocopy of 2 pieces of ID*
Surname:
Given Names (all):
Maiden Name (if applicable):
Occupation: Employer:
* Please provide photocopy of 2 pieces of ID*
Mailing Address:
PLUS 911/Street Address (if different from mailing address):
Phone: Res: Bus:
Cellular: Fax:
Preferred E-mail address for fan out messages (can include more than one):
(Note: more than one email addresses per member/household is acceptable.)
N.B. This application will be submitted to the R.C.M.P. for verification and final approval. Your signature(s) authorizes verification of this application by the R.C.M.P. All information obtained herein is held strictly confidential under PIPEDA regulation. I agree my membership in Okotoks Area Rural Crime Watch Association is contingent on adhering to the organization's fundamentals and bylaw as laid out with the intent of assisting the community under the direction of the R.C.M.P. with its efforts of Rural Crime Watch.
SIGNATURE (S):
*Please read carefully, fill in applicable blanks, and provide a photocopy of TWO pieces of identification: Valid Driver's License, Passport, Birth Certificate or other Government ID (one must have a picture) Don't forget to sign before mailing. Please send initial membership fee of \$15 by cheque made payable to: Okotoks Area Rural Crime Watch
Box 670, Okotoks, AB. T1S 1A8

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