



COMMUNITY PATROLS
OF
NEW ZEALAND

CPNZ ID Card Application Form

* Mandatory field

CPNZ PATROLLER PROFILE					
*Surname		*1 st name		Known as	
*Birth date		*Gender		D/Lic No	
Work #		Home #		*Mobile #	
*Address				Suburb	
City				Post Code	
*Email					
Skills	ie. First Aider, Mediator etc.				

PATROL PROFILE	
Patrol Name	
Patrol Leader	

POLICE LIAISON OFFICER	
Name	
Email	

IDENTITY CARD NUMBER	
If requesting replacement card	
Card Number	

I _____ accept that I am applying for a CPNZ ID card, that the ID card remains the property of CPNZ and I will surrender the ID card upon request.

I understand that the ID card issued to me provides a unique ID number, which provides me access to the CPNZ Secure Members site and as such I agree to not provide my ID card number to any other person.

I confirm I have read, understood and signed the CPNZ Code of Conduct form, which has been returned to the patrol.

Signed: _____

Email to: database@cpnz.org.nz