



KRUGERSDORP SECTOR 8 COMMUNITY POLICE FORUM

Patrollers personal information form

Personal Information:

Patroller Name: _____

Patroller Surname: _____

Patroller ID no: _____

Radio Call Sign: _____

Home Address: _____

Cell / Home no: _____

Email Address: _____

Patrol Vehicle being used:

Make & Model: _____

Reg number: _____

Colour: _____

In case of Emergency contact details:

Name & Surname: _____

Contact Details: _____

Relationship: _____

Any Medical conditions: _____

Medical Aid Details: _____

Medical Scheme: _____

Medical Aid Number: _____

Documentation to be submitted:

I confirm that all the provided information is accurate:

Copy of ID:

Copy of Drivers Licence:

Signed Patrollers Code of Conduct:

Digital photo:

Sign: _____

** Complete and return to info@kdcpf8.co.za*