

Manitoba Citizens on Patrol Program Group Registration Application

Group Name:		
Coordinator's Name:		
Mailing Address:		
Town/City:	Postal Code:	
Home Phone Number:	Work Phone Number:	
Fax Number:	Cell Phone Number:	
Email:		
Assistant Coordinator's Name:		
Mailing Address:		
Town/City:	Postal Code:	
Home Phone Number:	Work Phone Number:	
Fax Number:	Cell Phone Number:	
Email:		
Law Enforcement Contact Informa	ation	
Liaison Officer's Name:		
Detachment/Service Station:		
Address:		
Phone Number:	Cell Phone/Pager #:	
Fax Number:	Email:	



Genera	General				
1. Wh	Vhat are the boundaries of your patrolling area?				
2. The					
	ens on Patrol Program ("Manitoba COPP), in support of a provincial network of CO erstands and agrees with the following statements:	PP Programs,			
•	 We agree to support and adhere to the provincial program and training standa Manitoba COPP through the Manitoba Citizens on Patrol Board, which we have understand. 	•			
•	 We agree to conduct criminal record searches (CRS) on all volunteers, through enforcement agency, as a means to safeguard the community(s) we serve, in to the credibility of the community based COPP Programs 				
•	We agree that volunteers must be 18 years of age or older to be eligible to volunteers.	unteer with COPP			
•	 We agree to submit monthly reports to Manitoba COPP outlining patrolling and per month. 	d volunteer hours			
•	 We agree to notify the Manitoba COPP Board of any changes our contact inforces changes in coordinators and police liaison officer. 	mation including			
•	 We agree that should our application be accepted, the group and members will Letters of Agreement with Manitoba COPP, which can be terminated without r party. 				
•	We agree, to have a minimum of two volunteers patrolling together, especially	while walking.			
•	 We agree to keep all equipment provided in good working condition and that t will be used for COPP business only. 	he equipment			
•	 We agree to return all "group" equipment to Manitoba COPP should the group "member" equipment shall be returned or disposed at the discretion of MB CC 				
Sig	Signature: Date:				