

# Olde Town Neighborhood Watch Association Patroller Application

I, \_\_\_\_\_, understand and agree to follow all  
(please print) rules and procedures as stated by the Olde  
Town Neighborhood Watch Association (OTNWA).

While performing volunteer duties for OTNWA, I agree to:

- A. Maintain motor vehicle insurance.
- B. Consent to a background check.
- C. Wear OTNWA identification.
- D. Return any and all OTNWA equipment and identification to the patrol captain.

I understand that neither the OTNWA nor any members there of will be held liable for any damage to personal property, vehicles or personal injury incurred or caused while performing volunteer duties. I also understand that all duties are volunteer and there will be no reimbursement by the OTNWA for personal time or any type of motor vehicle expense.

The following information is required for certification and I understand by signing that I am authorizing the Del City Police Department to run a background check on me.

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



D.C.P.D. Use Only

OTNWA Use Only

Date: \_\_\_\_\_ Initial: \_\_\_\_\_

Date Received: \_\_\_\_\_

N.C.I.C. \_\_\_\_\_

Date Returned: \_\_\_\_\_

O.S.B.I. \_\_\_\_\_

Date Issued: \_\_\_\_\_

I.I.I. \_\_\_\_\_

Notes: \_\_\_\_\_

Accepted: \_\_\_\_\_ Rejected: \_\_\_\_\_

OTNWA #: \_\_\_\_\_

