



RIVER BEND COMMUNITY WATCH

CITIZEN MEMBERSHIP APPLICATION

(You must be a River Bend resident 18 years or older)

Applicant's Information:

Name	Date of birth	
Address:	E-mail:	
Phone: Home	Mobile	Work
Place of employment		

List names of all residents of your household (use back, if necessary):

Name
Name
Name
Name

*** NOTE Separate applications must be completed for each Community Watch applicant.**

Participation:

Do you have an interest in (please check):

- Performing Watch Patrols?
- Volunteering for special events?
- Volunteering to staff the police office?
- Serving on committees and task forces?
- Other _____

By signing this application, I hereby express my desire to become a member of the River Bend Community Watch. I understand that a criminal records check may be used as a basis of determining my suitability for membership and consent to having such records check performed. If accepted to membership, I agree to follow the policies and procedures outlined in the manual provided to me and other lawful policies and procedures as may be from time to time adopted by the Watch or the Town of River Bend.

Signature

Date

RIVER BEND COMMUNITY WATCH
CITIZEN MEMBERSHIP REQUIREMENTS AND PRIVILEGES

Membership:

Membership in Community Watch is free.

Watch members must reside in the Town of River Bend and be at least 18 years of age.

All resident applicants must fill out a membership application. You will be notified within 30 days regarding the status of your approval to join the Community Watch. Review and Final determination for all membership applications will be made by the River Bend Police Department. Membership may be terminated at any time for unacceptable behavior or violation of the Rules and Regulations set forth by the Police Department and Community Watch.

All members will be registered by the River Bend Police Department. When registered, you will be issued a Community Watch membership card. This card is the property of the River Bend Police Department and must be surrendered if you move out of the Town, resign your membership or your membership is revoked.

Every member will receive organizational literature and a Policy and Procedure Manual detailing crime reporting, patrol and general guidelines.

Community Watch Patrollers are not allowed to carry firearms or weapons of any kind. Patrollers are not to engage suspected criminals in any manner or attempt to apprehend.

Members are not to divulge proprietary Community Watch or law enforcement information to the general public or use such information for personal gain or agenda.

Privileges of Membership:

Each member:

1. May have one (1) vote at general meetings and at the annual membership meeting.
2. May run for Organization Officer offices.
3. May serve on task forces, standing and appointed committees.
4. May bring business before the membership.
5. May have items placed on meeting agendas for consideration.
6. May voice comments, suggestions, questions and concerns at general meetings.

TOWN OF RIVER BEND

Community Watch Volunteer

Acknowledgement, Waiver and Release of Liability

READ CAREFULLY, THIS IS A GENERAL RELEASE OF CLAIMS FOR INJURY:

I, _____ (please print), hereby agree to the following
(initial each item below):

_____ Initials
1. I understand there is an inherent risk associated with any community program that may result in injury, including my voluntary participation in Community Watch. Patrol duties may challenge my cardio-respiratory and musculoskeletal systems. I understand and am aware that the components of participation in Community Watch are potentially hazardous activities and may cause injury.

_____ Initials
2. I, for myself, my heirs, personal representatives, and assigns, do hereby waive and release the Town of River Bend, its elected officials and employees from any and all liability and responsibility for injury, accident, illness, legal and medical fees sustained now or in the future resulting from my participation in any Community Watch related activity.

_____ Initials
3. I acknowledge that I have read this waiver of liability form. I fully understand its terms and conditions, and understand that I am giving up my right to sue the Town of River Bend, its elected officials and employees. I acknowledge that I am signing this agreement voluntarily, and intend by my signature for it to be a complete and unconditional release of liability to the greatest extent allowable by law.

In consideration of participation in a Town of River Bend volunteer program or activity granted to the undersigned by the Town of River Bend, I, for myself, my heirs, personal representatives, and assigns, recognizing the dangers and risks associated with participation in such programs and activities, do hereby assume said dangers and risks involved in and associated with same at the Town of River Bend facilities, and do forever discharge the Town of River Bend, its agents, servants, and/or employees, of and from any and all claims, demands, damages, actions, causes of action, or suits of every kind, character, and description which I, my heirs, personal representatives, and assigns, may have for, on account of, or in connection with the permission extended to participate in a Town of River Bend recreational program or activity, or in any manner, directly or indirectly, resulting from, arising out of, or in connection with participating in such program or activity.

Signature of Participant: _____ Date: _____

Witnessed by: _____